



Making the **UNIVERSAL PERIODIC REVIEW** work for people who use drugs

Learning from the cycles completed
between 2008 and 2017

"I urge all States to examine the effectiveness and human rights impact of their current approaches to the so-called 'War on Drugs'. I urge more comprehensive implementation of the Outcome Document of the United Nations General Assembly Special Session on the World Drug Problem of 2016, including its 15 operational recommendations on human rights and related issues."

– Zeid Ra'ad Al Hussein, the UN High Commissioner for Human Rights, at the 37th session of the Human Rights Council, March 2018

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1. Introduction

People who use drugs have human rights and fundamental freedoms, which countries must respect, protect and promote, both nationally and internationally.

Yet human rights and drug control have existed in parallel universes¹ for decades, and drug policies receive little scrutiny from human rights mechanisms. This has contributed to repressive policies and practices for the control of drugs, which have led to or enabled a wide range of human rights violations and abuses worldwide. These violations and abuses

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disproportionately impacts the most vulnerable people in society, perpetuating cycles of poverty, violence, discrimination and marginalisation, while failing to reduce drug-related harms and risks.

The Universal Periodic Review (UPR), alongside other international and national human rights

mechanisms, is an important tool for holding countries that are part of the United Nations, known as UN Member States, accountable for respecting, promoting and fulfilling the human rights of people who use drugs, as well as fulfilling the pledges countries have made through the Sustainable Development Goals (SDGs). The UPR has the potential to improve human rights everywhere, for everyone. Countries can use it to initiate national human rights processes, and it can provide a valuable opportunity for civil society to engage governments on issues relating to human rights in the context of drug policies and people who use drugs.

According to a PITCH^{II} research study on the UPR and HIV^{III}, drug-related issues have been barely visible in the UPR process to date. This research shows that UPR recommendations relating to HIV and connected topics, such as policies in response to drug use, are an important tool for civil society actors to use to advocate for governments to take action, to respect, promote and fulfil the human rights of people living with HIV and key populations.

This report will:

- Introduce the UPR and explain its relevance to people who use drugs and civil society activists.
- Present a global analysis of the recommendations made by UPR cycles completed between 2008 and 2017 (cycles 1 to 3), focusing on the level of attention paid to drug-related issues by the UN Member States under review in regard to both *recommendations and voluntary commitments*.
- Provide recommendations and guidance to civil society on how to maximise the opportunities of the UPR.

2. What is the Universal Periodic Review (UPR)?

The UPR is a human rights monitoring mechanism established by the United Nations Human Rights Council (UNHRC) in 2006, for UN Member States to review each other's human rights record, every 4.5 years.^{iv} The first 'cycle' of reviews took place between 2008 and 2011, and the second review between 2012 and 2016. The third cycle began in 2017 and will conclude in 2021.



Source: UPR

The goal of the UPR is to improve the human rights situation in every country, with significant consequences for people around the globe. Its scope is very broad and extends to all human rights issues.

Key characteristics of the UPR:

- Member States are reviewed once every four years. The review is conducted at the UNHRC in Geneva by the UPR Working Group, comprised of Member States that act as reviewing States. They engage in dialogue with the States under review, asking questions and making recommendations for implementation and action. Each State under review may also make voluntary commitments on the actions it intends to take.

- The review is based on the following three documents:
 - A national report compiled by the State under review
 - A compilation of UN information
 - A stakeholder summary based on information provided by civil society organisations (CSOs) and national human rights institutions (NHRIs)
- The UPR is universal:
 - It involves all 193 UN Member States and it is based on the equal treatment of all countries.
 - It is not limited to a specific set of rights; rather it reviews and scrutinises how countries have met their human rights obligations. These obligations come from the UN charter, the Universal Declaration of Human Rights, customary human rights law, and all the human rights instruments Member States have ratified. It also includes any voluntary pledges or commitments States have made, such as under the SDGs.
- The UPR process differs from the ten core human right treaties^v for two reasons. Firstly, the recommendations that come from the UPR are not legally binding under international law. Secondly, the review is a peer-to-peer process between countries, rather than a dialogue with expert members of an elected treaty body committee.
- The UPR aims to be inclusive. In preparing for the review, information can be submitted to the UPR Working Group by a broad range of stakeholders, including the government, CSOs, NHRIs, UN agencies and individuals. Whilst preparing its report, the State under review is encouraged to conduct broad consultations in order to reflect the priorities and perspectives of a wide range of stakeholders, including human rights experts and civil society.



Kenneth 2018, Uganda :

"Something as basic as clean water is hard to find in drug hotspots. Injecting drug users are forced to mix heroin with blood or dirty water before injecting, increasing their exposure to HIV and other diseases.

Needle and Syringe Programme (NSP) kits provide sterlised water along with clean needles and syringes to these communities.

The Government must embrace NSP programmes to reduce HIV transmission and save lives."

The outputs of the review include:

- A set of **recommendations** made to the State under review by reviewing States. (Reviews are conducted by the UPR Working Group, which consists of the 47 members of the Human Rights Council. However, any UN Member State can take part in the discussion with the reviewed States.)
- The State under review's **response** to each recommendation (it can 'accept' or 'take note').
- Any **voluntary commitments** expressed by the State under review during the process to address the recommendations submitted.

The State under review has primary responsibility for implementing the UPR recommendations that it has accepted and is required to report on its progress during a mid-term review between UPR cycles.

3. Why is the UPR important?

Engaging with the UPR process has triggered the building of coalitions among civil society, both issue-based and across movements. It has also prompted greater coordination and communication between different sectors within a country, as well as between in-country UN agencies. Dialogue has increased between the government, civil society, the UN system and national human rights institutions. The UPR has created a new dynamic between governments and civil society, and many of the success stories of the UPR come from collaboration among national actors.^{vi}

The UPR has also spurred action on a range of issues at national level. For example, after Cuba's first review, the government adopted and published legal provisions

to respond to HIV and AIDS and offered legal protection to people living with HIV.

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Based on the experience of the global movement for the human rights of lesbian, gay, bisexual, transgender and intersex (LGBTI) people, we know that engaging expert bodies and

political mechanisms at the UNHRC can make a significant difference. This engagement has been crucial in building momentum for resolutions to further LGBTI rights, and for integrating sexual orientation, gender identity, gender expression and sex characteristics into global human rights discourses.

The UPR is not without its challenges. States under review may fail to meaningfully engage with civil society, NHRIs and other national stakeholders and this may result in critical human rights issues not being addressed. Governments may choose to reject certain recommendations that are aligned to, and consistent with, human rights norms and standards or fail to implement recommendations. National-level CSOs may not have the capacity to fully engage with and utilise the UPR process or know how to access evidence gathered within communities on human rights violations. Some CSOs may also face restrictions or obstruction from their national governments, which hinders their ability to participate in the UPR process.

Civil society engagement with the UPR in Indonesia

Civil society's involvement in the UPR process in Indonesia is strong and has significantly grown from the first to the third cycle. CSO representatives have described the UPR as the only international mechanism in which any issue can be raised and reviewed without waiting for domestic mechanisms to be exhausted. CSOs that work on similar issues (including women's rights, human rights, and the death penalty) have formed coalitions to engage with the UPR. This includes preparing and submitting joint stakeholder reports and conducting diplomatic and media briefings and campaigns to raise awareness of the issues and their proposed recommendations. Respondents felt that the benefits of engaging with the UPR include, not only raising awareness on human rights issues, but also forming more solid networks with other CSOs at national, regional and international levels. Overall, all parties (government, UN agencies, NHRIs, and CSOs) have shown increased engagement in the UPR from the first to the third cycle, demonstrating the will to take the mechanism seriously. During the third UPR cycle, for the first time HIV-focused CSOs in Indonesia submitted a joint stakeholder report as part of a coalition with other CSOs^{vii}

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4. People who use drugs, human rights and the UPR: looking forward

People who use drugs and who engage in the drug market endure a broad range of human rights violations and abuses.^{viii} They are systematically marginalised and discriminated against (including in healthcare, housing, and employment), and in many countries they are criminalised for using and/or possessing drugs. It is estimated that people who inject drugs are 22 times more likely to acquire HIV than other people.^{ix}

When it comes to drug control, a comprehensive system of human rights standards exist that should guide the action of governments. The key international human rights documents are the Universal Declaration of Human Rights, the UN International Covenant on Civil and Political Rights, the UN International Covenant on Economic, Social, and Cultural Rights, and UN Conventions on thematic issues such as the Convention on the Elimination of all Forms of Discrimination Against Women and the Convention on the Rights of the Child.

A compilation of drugs-related human rights standards is provided in the *International Guidelines on Human Rights and Drug Policy*, published in March 2019 by the International Centre on Human Rights and Drug Policy, UNAIDS, the World Health Organization (WHO), and the United Nations Development Programme (UNDP).^x

The enjoyment of virtually every human right can be impacted by drug policy. While no explicit mention of people who use drugs is made in the abovementioned documents, in the past 15 years UN bodies and mechanisms have provided an authoritative interpretation of these standards, clarifying the human rights obligation of Member States in relation to people who use drugs.

Since the 1990s, the UN General Assembly has adopted resolutions calling for a full integration of human rights standards in drug control policies.^{xi} A landmark step was the adoption of the 2016 United Nations Office on Drugs and Crime (UNGASS) Outcome Document, which stated that human rights should be a fundamental consideration in the design and implementation of any drug control policy, urging Member States to "ensure that national drug policies ...fully respect human rights and fundamental freedoms."^{xii} Also, for the first time in a high-level UN document, the General Assembly explicitly endorsed a number of harm reduction interventions.^{xiii}

Drug control bodies themselves provide some useful guidance. For example, in March 2018 the UN Commission on Narcotic Drugs adopted a resolution that encouraged Member States to promote "non-stigmatizing attitudes in the development and implementation of scientific evidence-based policies related to the availability of, access to, and delivery of health, care and social services for drug users, and to reduce any possible discrimination, exclusion or prejudice those people may encounter". It also called for Member States to meaningfully involve people who use drugs, their families and their communities in the development of drug policies.^{xiv}

The SDGs also provide an important reference, and the progress made by countries in realising the SDG targets can be scrutinised during the UPR. Goal 3 is particularly relevant, as under target 3.3 UN Member States committed to "end epidemics of AIDS, tuberculosis, malaria and neglected tropical diseases and combat hepatitis" by 2030. This cannot be achieved unless the human rights of people who use drugs are respected.

In general, it is now widely acknowledged that to ensure people who use drugs receive the highest attainable standard of health, which is a fundamental human right, countries must, at a minimum:

- Ensure the availability, accessibility and affordability of quality, evidence-based, culturally and gender appropriate harm reduction services.
- Ensure that quality drug dependence treatment services are available and accessible, scientifically sound, and compliant with the principle of free, prior, and informed consent.
- Address the social and economic determinants that hinder positive health outcomes related to drug use, such as stigma and discrimination against people who use drugs (including in healthcare and detention settings).^{xv}

5. Methodology

In order to more effectively utilise the UPR to advance the human rights of people who use drugs, it is important to assess how drugs-related issues have been addressed in the process so far. This report details findings from an analysis of the two UPR cycles completed between 2008 and 2016, during which all 193 UN Member States were reviewed twice. It also includes data from countries that were reviewed during the third cycle of the UPR in 2017.

The goal of this report is to support the advocacy efforts of civil society actors working on harm reduction and drug policy and provide useful resources for the effective utilisation of international human rights mechanisms, in particular the UPR.

The analysis was carried out in March 2019. UPR Info's *Database of UPR recommendations and voluntary*

pledges^{xvi} was used to compile the UPR recommendations relating to drug use, using a keyword search. The search was based on the following key words: drug, narcotic, psychotropic, harm reduction.

Study limitations

The analysis focused on UPR recommendations put forward during the first and second review cycles and the first two sessions of the third cycle, which had concluded by the time of writing and for which data had been uploaded to the UPR-Info database. National and other stakeholder reports were not reviewed. Whereas this analysis tracks the type of recommendations (i.e. general or specific), it does not include an in-depth analysis of their alignment with human rights standards.

Human Rights Council 39th regular session



6. Key research findings

1. This research found **129 recommendations explicitly relating to drugs, drug policy and drug control**. These represent just 0.2% of all UPR recommendations made between 2006 and 2017. Of the 129 drugs-related recommendations, 94 were accepted by the States under review. Public security accounted for 42% of drug-related recommendations, followed by the death penalty

in the context of drug trafficking, then drug trafficking itself.

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Notably, not all drugs-related recommendations are useful for advocating for the advancement of the rights of people who use drugs. Moreover, other recommendations not related to drugs can have

a negative impact on drugs-related issues. For example, Egypt – a country that retains the death penalty for drug offences – recommended that China, Vietnam, and Malaysia should *"continue using [their] sovereign right to apply the death penalty as a tool of criminal justice in accordance with proper safeguards specified under International Human Rights Law"*.^{xvii} The use of the term 'continue' implies that the death penalty for drug offences is in line with international human rights law, in direct contrast with the consistent and authoritative interpretations of UN human rights and drug control bodies.

2. Recommendations from Member States can be considered either 'general' or 'specific'. **In total, 40% of all recommendations were 'general'**. This means States suggested the following general actions: *accelerate, address, encourage, engage with, ensure, guarantee, intensify, promote, speed up, strengthen, take action, take measures or steps towards*. General recommendations are difficult to measure, and therefore difficult to fully implement, and can be

considered ineffective for improving the human rights situation in countries under review.^{xviii} However, general recommendations are more readily accepted than specific ones. They can also open space for country dialogue in response to a particular issue (especially highly controversial ones such as those related to drug control) and ensure that efforts and resources are allocated towards their implementation.

Around a third (34%) of the recommendations included 'specific' actions. Most of these recommendations addressed the death penalty and extra judicial killings. Specific, action-oriented, and measurable recommendations are more useful in holding countries accountable for their implementation. However, governments are more hesitant to accept specific recommendations as they may require precise actions to implement. While it is desirable for all UPR recommendations to be specific, critical, aligned to and consistent with human rights norms and treaties, recommendations that do not meet this standard can still be utilised in national dialogues and advocacy.

3. A total of 12 (9%) recommendations were categorised within the **right to health** and linked with other issues, including children's rights, public security, HIV and AIDS. Only five of these recommendations focused specifically on the right to health.

4. A number of recommendations focused on combating and preventing drug consumption. For example:

- *Strengthen measures to combat the high rate of drug and alcohol addiction among children* (recommendation from India to Peru, 3rd cycle).
- *Keep the systematic and coordinated work with the National Commission for Drug Control and Prevention and continue developing the help line services for the prevention of drug use and for sexual education with a gender perspective* (recommendation from El Salvador to Cuba, 2nd cycle).

Other recommending States, including France, Pakistan, Colombia, Portugal and Thailand, took a stronger approach to addressing the needs of people who use drugs from a right-to-health perspective. For example:

- *Guarantee medical care for persons suffering from drug addiction* (recommendation from France to Philippines, 3rd cycle).
- *Further strengthen the community-based rehabilitation programme for drug addicts, inpatients and outpatients for their integration into society* (recommendation from Pakistan to Philippines, 3rd cycle).
- *End compulsory drug treatment and reform mandatory reporting requirements to allow for anti-discriminatory access to health care* (recommendation from Portugal to Indonesia, 3rd cycle).

5. This analysis found only one recommendation explicitly on **harm reduction**. This was put forward by Colombia, which made the (accepted) recommendation to Thailand to "reinforce the harm reduction measures targeting drug users in order to avoid adverse health effects, including increased HIV infections and hepatitis".

Global coverage of essential harm reduction services for people who use drugs remains critically low. This is despite the Committee on the Elimination of Discrimination against Women and the Committee on the Rights of the Child calling upon states to increase funding for harm reduction.^{xix} The latest research by Harm Reduction International suggests funding for harm reduction in low- and middle-income countries has flat lined over the past decade. In 2016, funding for harm reduction amounted to just 13% of the US \$1.5 billion that UNAIDS estimates is required annually by 2020 for an effective HIV response among people who inject drugs.

6. Four recommendations (3%) addressed HIV and AIDS in the context of people who use drugs. Brazil, Canada, Colombia and Mexico provided these recommendations, all of which were made as 'general' recommendations. For example:

- *Further combat discrimination against persons with drug dependence and persons living with HIV-AIDS, particularly children* (recommendation from Brazil to Kazakhstan, 1st cycle).
- *Strengthen awareness-raising campaigns about the forms of contracting HIV/AIDS and respective preventive measures, particularly focusing on marginalized young persons, drug users, sexual workers of both sex and other groups which are vulnerable to being infected* (recommendation from Mexico to Jamaica, 2nd cycle).

7. The number of drug-related recommendations appears to be slightly increasing between cycles. The second UPR cycle contained 60 relevant recommendations, a significant improvement on to the 35 recommendations that were issued in the first cycle. However, this also reflected a more general trend, as the total number of recommendations also increased by 23% from the first to the second cycle.

8. Philippines, Malaysia, Guinea Bissau and Honduras received the most drugs-related recommendations. The countries that provided the most recommendations on drugs-related issues were Thailand, Egypt, the Holy See, Mexico, Lebanon, Malaysia and Spain. These countries covered a wide range of recommendations, including those relating to public security, justice and public health and were both specific and general. Any countries providing human rights-based recommendations could strengthen the impact of the UPR in the context of drug policy by championing these issues at the global level.

7. Conclusion

The human rights impact of repressive drug policies has been overlooked for a long time. But in recent years, and as a result of strong civil society activism, more and more attention is being paid to the many ways in which drug control initiatives impinge upon the commitments States have made to furthering human rights within their countries.

Due to its uniquely inclusive and universal character, the UPR constitutes an important tool for civil society to raise awareness of the wide spectrum of human rights violations endured by people who use drugs and their communities and to hold states accountable. Alliances of national, regional, and international advocates can be particularly effective in ensuring that drug-related issues are addressed at all stages of the UPR process, from drafting national reports, to advocating for strong recommendations, and overseeing and lobbying for the implementation of adopted commitments.

Our evidence suggests that, in general, the UPR is contributing to positive change on the ground. Yet the two completed review cycles fail to give the necessary attention to the rights of people who use drugs. It is important to maximise the opportunities under the UPR for drugs-related issues by increasing CSO engagement with the process, and by utilising drug-related topics already included in the review.

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8. Recommendations for communities and civil society

Global- and in- country CSOs and communities play different roles in the process, but together they can achieve change through coordinated advocacy. Some recommendations for action are outlined below.

1. Strengthen understanding on the links between drugs-related issues and human rights among key stakeholders engaged in the UPR, including civil society and government. This can lead to more Member States championing these issues during the UPR processes.
2. Pursue collaborations between movements for harm reduction and people who use drugs and other human rights groups, networks and coalitions (including women's and indigenous rights movements). This can strengthen civil society through increased dialogue and cooperation. It can also integrate different human rights issues across sectors, as well as bolstering advocacy efforts.
3. Engage and approach the UPR in a coordinated and strategic way, both at national and global level, ensuring strong linkages and collaborations. Reflect upon and develop a realistic strategy based on each actor's expertise and capacity to ensure the interests of people who use drugs are raised at all stages of the process.
4. For advocacy during future reviews, strategically target countries with a consistent record of making drug-related recommendations aligned to, and consistent with, human rights norms and standards. This engagement should be done at the permanent UN missions and embassies, as well as in the country capital, to ensure recommendations are strategically aligned.
5. Utilise drug-related recommendations, regardless of quality, to advocate for the implementation of specific actions aligned to, and consistent with, human rights norms and standards.
6. Utilise UPR recommendations on connected topics to engage in dialogue with governments and advance human rights issues related to drugs.
7. Utilise and maximise the whole human rights 'machinery', which can both tailor recommendations and exert pressure on governments to accept them. For example, the Treaty Monitoring Bodies Concluding Observations¹ can be used as a basis for recommendations. This can help civil society persuade the reviewing State to raise a recommendation as a Treaty Body has already agreed it. Similarly, consider how CSOs can use the thematic reports or country visits of relevant Special Procedures² in their advocacy as the basis for States to raise recommendations.

This can include:

- A. Participating in the national consultation process for the preparation of the country's national report.
- B. Preparing and submitting stakeholder reports individually and/or in coalition with other organisations.
- C. Advocating directly with the representatives of other countries to make recommendations related to the issues raised in stakeholder reports.
- D. Advocating with the government to accept recommendations received and then implement them in a way that benefits affected populations, then monitoring implementation efforts.

¹ www.ohchr.org/EN/HRBodies/Pages/WhatTBDo.aspx

² mpactglobal.org/achieving-hiv-targets-human-rights-instruments/

9. Guidance^{xx} on non-governmental organisation (NGO) participation in the Universal Periodic Review (UPR) for the third cycle (2017-2021)

Ways for NGOs to take part and influence the UPR process:

1. Participate in the national consultations held by the State under review
2. Send information on the human rights situation in the country (NGO submission on the State under review)
3. Lobby members of the UPR Working Group and other Member States active in the Human Rights Council
4. Take the floor at the Human Rights Council during the adoption of the report (please note that individuals may only enter the UN building if they have been issued with a pass by an NGO-registered with the UN Economic and Social Council)
5. Monitor and participate in the implementation of the UPR recommendations by the State under review

I. Before the review

Ways for NGOs to take part and influence the UPR process	Opportunities for partners to influence UPR
Participate in the national consultations held by the State under review . ³	NGOs can seize this opportunity to run a national campaign to promote the UPR and bring it to the attention of the general public and the media.
Submit information on the human rights situation. ⁴ (The national report , the compilation and the summary as well as NGO submissions, are usually available on the OHCHR website six weeks before the start of the UPR working group . ⁵)	The deadline for the submission of information is about six to eight months before the session . Late submissions are not considered. Deadlines for the entire third cycle can be accessed by <u>country</u> and by <u>session</u> .
Lobby reviewing States and the States under review.	<p>NGOs can lobby countries in order to bring to their attention to specific issues and to ensure they will be addressed during the interactive dialogue in the form of questions and/or recommendations. Those issues can also be raised through advance questions submitted before the review.</p> <ol style="list-style-type: none"> 1. Identify UN Member States that are likely to speak out on your advocacy issue for lobbying purposes, by analysing past reviews and recommendations made. 2. Prepare a 1 – 2 page briefing to disseminate to other governments for the purpose of lobbying⁶ 3. Lobbying can be done with Member State embassies and/or missions, both in Geneva and in the country under review:

³ In order to write a national report to be submitted to the UPR Working Group for the review, the State under review is encouraged to hold a "broad consultation process at the national level with all relevant stakeholders" (Resolution A/HRC/RES/5/1). These consultations should take place at least a year before the review. The UPR Working Group hosts the sessions of the UPR and is essentially the same body as the Human Rights Council. It consists of all 47 countries of the Human Rights Council and is chaired by the President of the Human Rights Council. The UPR Working Group generally meets three times a year in February or March, April or May, and November or December. Each session meets for approximately 10 days. Around 16 UN countries are reviewed during each session, and 48 are reviewed per year.

⁴ The review of a country is based on three reports:

1. A **National Report** prepared by the State concerned on the human rights situation in the country
2. A **compilation** prepared by the Office of the High Commissioner on Human

Rights (OHCHR) containing information from treaty bodies, special procedures and UN agencies such as UNDP and UNICEF

⁵ A 10-page summary prepared by the OHCHR containing information from civil society.

⁶ An individual submission by an NGO is limited to 2815 words, excluding footnotes and annexes. A joint submission submitted by a coalition of NGOs (two NGOs or more) can reach 5630 words. An NGO can submit only one individual submission but can be part of as many joint submissions as wanted. Submissions have to follow the [OHCHR Technical guidelines](#) (updated in March 2015) and submitted to the OHCHR online system. To do this, NGOs have to register on the [OHCHR's website](#). When the submission is finalised, the NGO has to login to the online system and upload the document. The new submission should then be listed in the system. Please read the [OHCHR's guide on the online registration system](#) for more information.

Lobby reviewing States and the States under review.

Lobbying can take place in the country under review through embassies in the capital. **This lobbying must be done three to four months before the date of review** as the information then has to be sent to the capital of the Member State and its mission in Geneva.

In **Geneva conduct lobbying at least one month before the date of review**, as Member States need time to draft recommendations and questions, and conduct consultations between the capital, the embassy in the country under review and Geneva. Contact the diplomat who oversees the UPR or Human Rights Council issues. The contact details of all missions are [here](#).

To facilitate NGO lobbying, UPR Info organises 'pre-sessions' in Geneva between NGOs and Permanent Missions. One month before the review, UPR Info organises a one-hour meeting on the State under review and will give the floor to national and international NGOs to brief Permanent Missions about the human rights situation in the country. There is more information about the pre-sessions [here](#).

II. During the review

Ways for NGOs to take part and influence the UPR process

- Attend the review⁷
- Hold a side event⁸
- Organise a screening of the webcast in the country⁹
- Hold a media conference and/or release a media statement

Opportunities for partners to influence the UPR

- Consider whether there is value in participating at this stage, as NGOs are not allowed to take the floor but only able to be present in the room as observers.
 - NGOs can follow the review session live on the UN webcast, report the statements made, and post about it on a blog or on social media platforms such as Twitter and Facebook.
 - Immediately after the review, NGOs can hold a media conference and/or issue a media statement to share their assessment of the review.
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III. Between the review and the report's adoption at the Human Rights Council

Ways for NGOs to take part and influence the UPR process

Lobby the State under review to accept the recommendations.

Opportunities for partners to influence the UPR

- NGOs should lobby the State under review in the capital to accept as many relevant recommendations as possible. NGOs should also ensure that the government submits to the Human Rights Council an "addendum" containing clear and detailed responses to each recommendation it has received.
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⁶ When meeting with delegates, whether in country or in Geneva, it is important to concentrate on priority issues. For each priority issue present four or five **specific questions and recommendations**. Those recommendations should be action-oriented and presented in a short document of one or two pages. This will allow delegates to easily incorporate them in their statements. For an example document, see the [Advocacy Charter](#) prepared by Kenyan NGOs.

⁷ Civil society organisations are not allowed to take the floor during the review; they can be present in the room. CSOs must enjoy ECOSOC consultative status to enter the , otherwise they can access the public gallery. More information can be found in OHCHR's practical guide [\[AR - CN - EN - FR - RU - SP\]](#)

⁸ As during the Human Rights Council, NGOs have the possibility to hold side events during the session of the UPR Working Group. However, side events the day before the review should not be organised for lobbying as it will have limited impact on delegations' statement. Lobbying in Geneva should be made one to two months before the review. Side events can also be organised right after the review to debrief on the content of the review and the responses given by the government.

⁹ Each review is webcast, which means it is filmed by the UN and streamed live and in archive on the [UN website](#). NGOs can organise a screening of the review in a cinema or in a conference room and invite civil society, journalists, parliamentarians, the opposition, the UN agencies and others.

IV. During the report's adoption at the Human Rights Council

Ways for NGOs to take part and influence the UPR process	Opportunities for partners to influence UPR
Make an oral statement.	<p>During the adoption of the report of the Human Rights Council Working Group at the HRC plenary session (usually, a few months after the review), 20 minutes are allocated to NGOs to make a statement. In total, ten NGOs are given two minutes each.</p> <p>To speak, NGOs need to sign up online the week before the beginning of the session, which are usually held on Thursdays at 14.00 Geneva (CET) time. (Please check the exact date and time here). NGOs will then have to confirm in person at the List of Speakers' Desk the day before speaking. The ten slots will be allocated on a first come, first serve basis. The online form for the sign-up is available here. Prior to signing up, NGOs have to obtain account log-in details. More information about the sign-up process is available in the OHCHR Guidelines - EN, FR, ES.</p> <p>NGOs may also deliver a statement by video instead of travelling to Geneva. This option will be given to organisations involved in the national process or that have contributed to the summary of stakeholder information prepared by the OHCHR. The criteria to be granted the right to participate via video is to not have an office or representative in Geneva and not have individuals accredited to the relevant session of the Council. NGOs need to indicate in the online form that they wish to participate via video. Guidelines for video statements are available here.</p>
Submit a written statement.	<p>As during any Human Rights Council plenary, NGOs can submit written statements under any item, including Item 6, which is dedicated to the UPR. However, written statements have less impact than oral ones.</p> <p>For more details on how to take the floor or submit statements, see the HRC website.</p>

V. Between two reviews

Ways for NGO to take part and influence the UPR process	Opportunities for partners to influence UPR
States are required/obliged to implement the recommendations they have accepted and the voluntary pledges they have taken. At the next UPR, they will be reviewed on the implementation of those recommendations and pledges, and on the human rights situation in the country since the previous review.	<p>NGOs have an important role to play between two reviews. NGOs can:</p> <ul style="list-style-type: none">- Make a country's recommendations and pledges public- Monitor the implementation of recommendations- Engage in dialogue with the State reviewed to participate in the implementation of recommendations.- Report on progress to the Human Rights Council by publishing a mid-term report or by making a statement at any general debate under Item 6. <p>You can learn more with our Follow-up Kit.</p>

Further reading on the UPR

UPR Info: www.upr-info.org

Health Rights (2012) 'Universal Periodic Review: The Role of NGOs at the UPRs'. Available at health-rights.org/index.php/cop/item/universal-periodic-review-the-role-of-ngos-at-the-uprs

UNHRC '3rd UPR cycle: contributions and participation of "other stakeholders" in the UPR' (accessed April 2019). Available at www.ohchr.org/EN/HRBodies/UPR/Pages/NgosNhris.aspx

UPR Info (27 April 2014) 'Deadline for NGOs and NHRIs submission for the 27th Session of the UPR' (accessed April 2019). Available at www.upr-info.org/en/news/deadline-for-ngos-and-nhris-submission-for-the-27th-session-of-the-upr

Child Rights Connect 'Universal Periodic Review' (accessed April 2019). Available at www.childrightsconnect.org/connect-with-the-un-2/universal-periodic-review/

European Network on Statelessness (14 May, 2015) 'Using the UPR to address statelessness' (accessed April 2019). Available at www.statelessness.eu/blog/using-upr-address-statelessness

UN Department of Economic and Social Affairs: NGO Branch 'Basic facts about ECOSOC status' (accessed April 2019). Available at csonet.org/index.php?menu=17

Toolkits offering step-by-step guidance on engaging with the UPR:

Sexual Rights Initiative (2018) 'Sexual Rights and the Universal Periodic Review: A toolkit for advocates'. Available at www.sexualrightsinitiative.com/universal-periodic-review/upr-toolkit/

UPR Info (2017) 'The Civil Society Compendium: A comprehensive guide for Civil Society Organisations engaging in the Universal Periodic Review'. Available at www.upr-info.org/sites/default/files/general-document/pdf/upr_info_cso_compendium_en.pdf

OHCHR (2013) 'A Practical Guide for Civil society: Universal Periodic Review'. Available at www.ohchr.org/_layouts/15/WopiFrame.aspx?sourcedoc=/Documents/AboutUs/CivilSociety/HowtoFollowUNHRRRecommendations.pdf&action=default&DefaultItemOpen=1

- I Hunt, P (2008) 'Human rights, health, and harm reduction. States' amnesia and parallel universes',. Available at: www.hri.global/files/2010/06/16/HumanRightsHealthAndHarmReduction.pdf
- II PITCH stands for the Partnership to Inspire, Transform and Connect the HIV Response. It is a strategic partnership between Aidsfonds, Frontline Aids and the Ministry of Foreign Affairs of the Netherlands.
- III PITCH/Bridging the Gaps (2018) 'Making the Universal Periodic Review Work for HIV. Global analysis on the cycle 1 and 2'.2018. Available at aidsfonds.org/resource/making-the-universal-periodic-review-work-for-hiv
- IV For more information visit www.ohchr.org/EN/HRBodies/UPR/Pages/BasicFacts.aspx
- V MSM Global Forum (MSMGF) (2017), 'Achieving HIV targets through Human Rights Instruments'. Available at msmgf.org/achieving-hiv-targets-human-rights-instruments/
- VI UPR Info (2014), 'Beyond promises – The impact of the UPR on the ground'. Available at www.upr-info.org/sites/default/files/general-document/pdf/2014_beyond_promises.pdf
- VII PITCH (2018) 'Making the Universal Periodic Review Work for HIV. Experiences from Indonesia, Uganda and Ukraine'. Available at frontlineaids.org/wp-content/uploads/old_site/0117-PITCH_landencases_web_original.pdf?1528377282
- VIII UNAIDS (2019) 'Health, Rights and Drugs'. Available at www.unaids.org/sites/default/files/media_asset/JC2954_UNAIDS_drugs_report_2019_en.pdf
- IX UNAIDS (2018) 'Miles to go: closing gaps, breaking barriers, fighting injustices'. Available at www.unaids.org/en/resources/documents/2018/global-aids-update
- X International Centre on Human Rights and Drug Policy, UNAIDS, WHO, UNDP (2019) 'International Guidelines on Human Rights and Drug Policy'. Available at www.humanrights-drugpolicy.org/
- XI Among others, see UN General Assembly (22 January 2019) 'International cooperation to address and counter the world drug problem. UN Doc. A/RES/73/192'
- XII Outcome Document of the 2016 United Nations General Assembly Special Session on the World Drug Problem, Paragraph 4(a). Available at www.unodc.org/documents/postungass2016/outcome/V1603301-E.pdf
- XIII Penal Reform International (6 February 2017) 'The global state of harm reduction in prisons: Inadequate, unreliable and unlawful'. Available at www.penalreform.org/blog/the-global-state-of-harm-reduction-in-prisons/
- XIV Promoting non-stigmatising attitudes to ensure the availability of, access to and delivery of health, care and social services for drug users
- XV International Centre on Human Rights and Drug Policy, UNAIDS, WHO, UNDP (2019) 'International Guidelines on Human Rights and Drug Policy'. Available at www.humanrights-drugpolicy.org/
- XVI UPR Info's Database of UPR recommendations and voluntary pledges is available at <https://www.upr-info.org/database/>
- XVII Ibid.
- XVIII UPR Info (2014), 'Beyond promises – The impact of the UPR on the ground'. Available at www.upr-info.org/sites/default/files/general-document/pdf/2014_beyond_promises.pdf
- XIX See CEDAW/C/RUS/CO/8, para 35(d), CEDAW/C/CAN/CO/8-9 para 45(a), General Comment No. 3 on HIV/AIDS and the rights of the child, General Comment 15 (2014) on right of the child to the highest attainable standard of health, and CRC Concluding Observations on Ukraine, Austria, Albania; Harm Reduction International (2018) 'The lost decade: Neglect for harm reduction funding and the health crisis among people who use drugs'. Available at www.hri.global/files/2018/09/25/lost-decade-harm-reduction-funding-2018.PDF
- XX Guidance developed by the International Drug Policy Consortium.

About us...



The International Drug Policy Consortium (IDPC) is a global network of 182 NGOs that focus on issues related to drug production, trafficking and use. IDPC promotes objective and open debate on the effectiveness, direction and content of drug policies at the national and international level, and supports evidence-based policies that are effective at reducing drug-related harm. Our global membership has expertise and experience on the wide spectrum of drug policy issues.



Harm Reduction International is a leading NGO dedicated to reducing the negative health, social and legal impacts of drug use and drug policy. We promote the rights of people who use drugs and their communities through research and advocacy to help achieve a world where drug policies and laws contribute to healthier, safer societies.



The Partnership to Inspire, Transform and Connect the HIV response (PITCH) enables people most affected by HIV to gain full and equal access to HIV and sexual and reproductive health services. The partnership works to uphold the sexual and reproductive health and rights of lesbian, gay, bisexual, and transgender people, sex workers, people who use drugs and adolescent girls and young women. It does this by strengthening the capacity of community-based organisations to engage in effective advocacy, generate robust evidence and develop meaningful policy solutions. PITCH focuses on the HIV response in Indonesia, Kenya, Mozambique, Myanmar, Nigeria, Uganda, Ukraine, Vietnam and Zimbabwe. Partners in these countries also share evidence from communities to influence regional and global policies that affect vulnerable populations. PITCH is a strategic partnership between Aidsfonds, Frontline and the Dutch Ministry of Foreign Affairs.



Bridging the Gaps is an alliance of nine international organisations and networks and more than 80 local and regional organisations in 15 countries, working towards the end of the AIDS epidemic among key populations. To get there we envision a society where sex workers, lesbian, gay, bisexual and transgender (LGBT) people and people who use drugs (PWUD), including those living with HIV, are empowered and have their human rights respected.



