

## 49th Session of the Human Rights Council

# DRUG POLICY HIGHLIGHTS

On Friday 1<sup>st</sup> April, the Human Rights Council concluded its 49<sup>th</sup> Session (28 February – 1 April 2022). Several dialogues and resources addressed drug control and its human rights impacts. Below is a review of some key moments and documents.

### DRUG POLICY RAISED IN RELATION TO COUNTRY SITUATIONS

- The Special Rapporteur on **Cambodia** [called](#) for improvement to tackle the overload of the prison system. As the majority of people in prison in the country are held on drug-related charges, the Rapporteur urged the government to “explore more rehabilitative measures rather than retributive sanctions.” IDPC and Amnesty International raised similar concerns in a [joint statement](#), and called on the Rapporteur “to pursue genuine efforts to reduce the numbers of people in prison and places of detention, including the review of its drug laws and ensuring that people charged with drug offences have access to real alternative.”
- The report of the High Commissioner on the human rights situation in **Colombia** [paused on](#) illicit crop cultivation and noted how “the coca, marihuana and poppy growers that entered the crop substitution programmes complain of low levels of implementation of productive projects and delays in the formulation of the National Plans for Comprehensive Rural Reform contemplated in the peace agreement.” The report also highlighted the risks faced by human rights defenders supporting crop substitution programmes, and denounced the “killing of a female governor of the Nasa people in Caldono (Cauca) involved in voluntary coca crop substitution processes.”
- The Special Rapporteur on **Iran** [denounced](#) a significant increase in drug-related executions in the country between 2020 (at least 25) and 2021 (at least 80, of which at least one woman and four foreign nationals). The Rapporteur also reiterated concerns for the use of forced confessions under torture as evidence for death penalty convictions, and the lack of investigations into torture allegations. An emblematic case included in his report is that of “Khezr Ghavidel, arrested in 2013 and sentenced to death for carrying drugs. His case was pending a decision at the Supreme Court when he was executed on 10 September 2020. Almost a year after his execution, in July 2021, the Supreme Court overturned his death sentence.” The Rapporteur also reiterated how Revolutionary Courts, established in 1980 with jurisdiction over drug crimes and other offences, “have consistently violated fundamental human rights, including due process rights and the right to a fair trial.” Concerns for drug-related executions in Iran were echoed by the High Commissioner in her [oral update](#) on the activities of her Office and recent human rights developments (8 March). The Rapporteur’s mandate was renewed by [resolution 49/24](#), adopted with a close vote.
- The Independent fact-finding mission on **Libya** [reported](#) a raid by Libyan security forces in October 2021 “in the context of xenophobic statements associating migrants with criminality and drug trafficking” targeting foreigners and migrants, leading to at least one death.
- The [report](#) of the High Commissioner for Human Rights on **Sri Lanka** reiterated concerns raised in previous sessions about deaths in custody and alleged armed encounters with police, including an apparent drug-related death in custody. The case was also highlighted of Chandran Vidushan, who died in police custody on 3 June reportedly of a drug overdose, whose family denounced he was tied to a tree and severely beaten by police with poles before taking him away. The report acknowledged some positive steps taken to reduce prison overcrowding in the context of the COVID-19 pandemic, including directions issued by the Attorney General to the police to reduce incarceration of people arrested for possession of “user-quantities of drugs”. HRI intervened with a joint [oral statement](#) addressing militarisation of drug control and treatment, arbitrary killings, and compulsory drug rehabilitation centres.
- The Special Rapporteur on Minority issues, in their [report](#) on the country visit to the **United States**, noted the impact of the national ‘War on Drugs’ launched in the 1970s on the disproportionate criminalisation of “large swaths of minority populations.” According to the Rapporteur, this has resulted in “a vicious circle of exclusion and barriers to later employment and inclusion in society for those with criminal antecedents, such as accessing adequate housing, social programmes and credit. Ultimately millions – overwhelmingly minorities – are being effectively excluded from political representation and the right to vote because of felony or even misdemeanor convictions and associated penalties.”

### COVID-19 AND DRUG CONTROL

- The [summary report](#) of the full-day intersessional seminar on good practices, key challenges and new developments relevant to **access to medicines and vaccines** (held on 8 December 2021) reported Mr. Kazatchkine’s intervention focusing on drug policy. The intervention recalled that the Secretary-General and the Special Rapporteur on the right to health had recognised people who use drugs as a vulnerable group in the pandemic context due to criminalization, stigma, discrimination, underlying health issues, social and economic vulnerability, and limited access to life-saving harm reduction programmes. Mr Kazatchkine also denounced how in the pandemic context, people who use drugs would face significant human rights abuses, and noted a number of innovations in the provision of services to people using drugs under COVID-19 restriction measures, such as partnerships between medical centres and non-governmental organizations for the daily provision of preventive materials, therapy for dependence, antiretroviral medicines and food supplies to clients, particularly in remote



areas. Such exceptional initiatives should be “the basis for relevant policy reforms and a reconsideration of current criminalization approaches for non-violent drug offences.”

- HRI delivered a [joint oral statement](#) during the “Meeting on enhancing technical cooperation and capacity-building in promoting and protecting the human rights of persons in vulnerable and marginalized situations in recovery efforts during and after the COVID-19 pandemic.” The statement highlighted the negative health and human rights consequences of securitised COVID-19 responses, and called on Member States to ensure the right to participation is promoted in negotiations at WHO around the new ‘Pandemic Treaty’; with particular attention on vulnerable, marginalised and criminalised communities.

## OUTCOMES OF UNIVERSAL PERIODIC REVIEWS

The outcomes of the Universal Periodic Reviews of several countries were adopted. No specific recommendation on drug policies was made, but there were several relevant recommendations related to HIV/AIDS:

- **Eswatini** accepted a number of HIV/AIDS-related recommendations, including to “redouble efforts to combat HIV/AIDS-related stigma and discrimination”, and “raise public awareness about the dangers of HIV infection, including the harm associated with the stigmatization of HIV patients.”
- **Papua New Guinea** accepted a recommendation to increase health-care funding and facilities, even in rural areas, to provide medical assistance to people living with HIV.
- **Tajikistan** reported the recent adoption of the 2021–2030 National Drug Control Strategy and the related implementation plan, as well as the adoption of 2021 amendments to the Criminal Code adopted which “had provided for the criminalization of trafficking in new psychotropic substances.” Tajikistan accepted a recommendation to “take concrete steps to address the stigmatization and discrimination faced by persons living with HIV/AIDS, including in law and in practice.”
- **Trinidad and Tobago** accepted several recommendations related to HIV, including to “advance in guaranteeing the right to health for people living with HIV/AIDS by strengthening inter-institutional coordination and establishing programmes and strategies to reduce the HIV infection rate, especially among adolescents and young women” and to “address the root causes of the prevalence of HIV/AIDS and implement preventive strategies to combat HIV.”

## OTHER RESOURCES:

- The [summary report](#) on the fourth intersessional meeting for dialogue and cooperation on human rights and the 2030 Agenda for Sustainable Development (held on 18 January 2022) noted how “**discriminatory criminal laws**, such as those that target individuals based on sexual orientation, gender identity, sex work or drug use undermine rather than aid health responses and actively push communities further behind.”
- The International Drug Policy Consortium (IDPC) delivered an [oral statement](#) during the Interactive Dialogue with the Special Rapporteur on **torture**, denouncing widespread abuses against people who use drugs in Nigeria, and calling on States to (a) decriminalise drug use and drug possession for personal use, (2) establish evidence-based and rights-based drug treatment and harm reduction services, and (3) work to remove the stigma and discrimination experienced by people who use drugs.