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Statement by Harm Reduction International

Thank you Chair for the opportunity to make this intervention on behalf of Harm Reduction International, with support from Anti-Death Penalty Asia Network (ADPAN), Lembaga Bantuan Hukum Masyarakat, Indonesia, and Transformative Justice Collective, Singapore.

We are heartened by the statements at the general debate reiterating Member States' commitments to respecting, protecting and promoting all human rights, fundamental freedoms and the inherent dignity of all individuals in the development and implementation of drug policies, and welcome the statement delivered by Mr Seree Nonthasoot this morning with emphasis on the areas where progress to advance human dignity and human development can be made, especially in the context of economic, social and cultural rights. Human rights and drug control are not inherently incompatible systems. On the contrary, they can mutually reinforce each other, towards healthier, safer, and more inclusive societies.

The implementation of punitive and ineffective drug policies, however, hampers the realisation of this goal.

In the past ten years, at least 4,000 people were executed for drug offences around the world, in contravention to both human rights and drug control standards. In 2022 alone, Harm Reduction International recorded at least 285 executions – this is an over 100% increase from 2021, and a staggering 850% increase from 2020. To these, hundreds must be added that we don't know about due to the systemic lack of transparency in many retentionist states. It is particularly concerning that those convicted of drug offences often comes from ethnic minorities, immigrants, persons with disabilities, and/or with poor socioeconomic backgrounds. These facts and figures must be a wake-up call for Member States, and to intergovernmental agencies - that death penalty abolition must become a priority, including in the context of the implementation of the drug control conventions.

Another key objective of the conventions is the protection and promotion of the right to health, including of persons who use drugs. Essential to fulfilling this right is the provision of quality harm reduction services, in the community as well as in detention settings. We welcome the slight uptake in harm reduction services recorded by our latest Global State of Harm Reduction. Nevertheless, the coverage and scale of harm reduction services is still limited, and great inequalities remain within and between regions and countries in terms of access. In countries where harm reduction programmes are implemented, availability, accessibility and quality remain significant issues. Services are unevenly distributed, and certain populations experience these barriers particularly acutely; most notably, women, LGBTQI+ people, people who are migrants or refugees, young people, and Black, Brown, and Indigenous people, all of whom face a lack of services tailored to their needs. Country's punitive laws mandates healthcare professionals to report persons who test positive for drugs to the authorities – discouraging them from accessing lifesaving care.

Harm reduction interventions are evidence-based, cost-effective, protect against HIV and hepatitis C, and save lives. We therefore urge member states to upscale their efforts in ensuring harm reduction interventions are available, accessible, and of good quality. That also requires redirecting funds away from ineffective interventions - including punitive drug law enforcement and compulsory drug treatment - towards evidence-based, rights-based policies which place communities at the centre.