

63rd SESSION OF THE HUMAN RIGHTS COUNCIL: DRUG POLICY OPPORTUNITIES

August 2026

The upcoming [63rd Session of the Human Rights Council](#), to be held between 7 September and 7 October 2026, presents critical opportunities for reflecting on the impacts of drug control policies on human rights worldwide and on States' obligations to promote and protect people's rights, while discussing pathways for reform.

Below are some key moments where drug policy will or can be addressed, and suggestions for mainstreaming drug policy in the session. More information about civil society participation during the session can be found [here](#).

ID WITH THE WORKING GROUP ON ARBITRARY DETENTION

Item 3, 15 September at 12 PM GVA

The Working Group will present a thematic study ([A/HRC/63/33](#)) on transnational repression and arbitrary detention, as well as a report on its visit to Australia ([A/HRC/63/33/Add.1](#)). The thematic study examines how States use physical, legal and digital measures to silence dissent and human rights advocacy across borders, including through unlawful extradition, prosecutions and digital surveillance. The study highlights the resulting risks of arbitrary deprivation of liberty and violations of due process and fair trial rights. This study is relevant to drug policy discourses, as drug policy and harm reduction advocates face cross-border harassment, surveillance, criminalisation and other forms of repression because of their advocacy. Member States and civil society can use this opportunity to call for safeguards against the misuse of extradition and other cross-border mechanisms, and for protection of those advocating for drug policy reform and human rights.

On Australia, the Working Group raises concerns that high rates of prosecution for drug possession, restrictive bail regimes and coercive drug diversion and court programmes disproportionately affect people in vulnerable situations and contribute to the overrepresentation of First Nations people in detention. It calls for drug diversion programmes and specialist drug courts to be genuinely voluntary, not conditional on a guilty plea, and to prioritise non-custodial, community-based treatment. It also recommends equal access to

evidence-based harm reduction and treatment, including opioid substitution therapy, for both people on remand and sentenced prisoners.

The two reports provide opportunities for Member States and civil society to highlight the human rights implications of drug law enforcement and responses to drug dependence. Interventions can call for drug policies that prioritise health, dignity and due process, including voluntary community-based treatment, access to harm reduction in detention, and safeguards against coercive diversion measures. They can also draw attention to the disproportionate impact of punitive drug policies on marginalised communities, including First Nations peoples, and stress the importance of protecting those advocating for drug policy reform from criminalisation and repression.

PRESENTATION OF SECRETARY-GENERAL AND HIGH COMMISSIONER THEMATIC REPORTS

Item 3, 16 September at 3 PM GVA

The Council will consider three reports relevant to drug policy and human rights, including the right to health.

The first is the OHCHR study on **protection gaps of vulnerable segments of the population regarding access to medicines and vaccines in the context of the right of everyone to the highest attainable standard of physical and mental health** (A/HRC/63/85). The report (soon to be available [here](#)) is expected to examine the protection gaps and barriers that prevent vulnerable and marginalised populations in developing countries from accessing medicines, vaccines, and other essential health products. It will analyse how factors such as conflict, economic and fiscal constraints, declining international support, supply chain disruptions, discriminatory policies and narratives, digitalisation, and climate change affect equitable access to healthcare. The study will also explore the challenges States face in assessing and addressing these gaps and will identify recommendations and priorities to strengthen universal, equitable, and sustainable access to health products for all, particularly those most at risk of exclusion.

The second report is the OHCHR study on the **impact of drug policies on the rights of women and girls** (A/HRC/63/56). The report (soon to be available [here](#)) is expected to consider the human rights impacts of drug laws, policies and programmes on women and girls; efforts to mainstream gender and ensure women's participation in drug policy development, implementation, monitoring and evaluation; and, approaches to addressing the specific needs of women and girls affected by drug use and drug law enforcement. It is also expected to examine how drug policies can compound existing forms of discrimination and disproportionately affect certain groups of women and girls.

The third report (A/HRC/63/46), soon to be available [here](#), addresses the **question of the death penalty**, and is expected to reconstruct key trends and developments concerning use of capital punishment, including in the implementation of drug laws.

The presentations will be followed by a General Debate on 16 and 17 September, providing an opportunity for Member States and civil society to connect the findings of the three reports to broader drug policy concerns. Interventions could highlight the need to remove unnecessary barriers to access to controlled medicines for legitimate medical purposes; reiterate concerns about the use of the death penalty for drug offences; and draw attention to the gendered and disproportionate impacts of drug laws and enforcement on women and girls. Member States and civil society can also call for drug policies and programmes to be grounded in human rights, informed by the experiences of affected communities, and responsive to the specific needs of women and girls. This provides an opportunity to bring these issues together under the broader message that drug control measures must not undermine the right to health or other human rights, and reiterate that drug offences do not meet the threshold of the “most serious crimes” to which the death penalty may be limited under international human rights law and standards.

ID WITH THE SPECIAL RAPPORTEUR ON THE RIGHTS OF INDIGENOUS PEOPLES

Item 3, 23 September at 12 PM GVA

The Special Rapporteur on the rights of Indigenous Peoples, Albert K. Barume, will present his thematic report ([A/HRC/63/30](#)) on historical and contemporary violations of the sexual and reproductive health and rights of Indigenous women and girls, alongside his report on his visit to Botswana ([A/HRC/63/30/Add.1](#)).

The report highlights how drug trafficking and other illicit economies can contribute to the militarisation and criminalisation of Indigenous territories, bringing criminal networks, external workers and private security actors into Indigenous communities. In these contexts, Indigenous women and girls face heightened risks of trafficking, sexual exploitation and violence, which contribute to disproportionately high rates of sexually transmitted infections, including HIV/AIDS.

The Special Rapporteur’s report on his visit to Botswana highlights the vulnerability of Indigenous children, particularly girls, to sexual exploitation, gender-based violence, early pregnancy, HIV infection and exposure to drugs. It also identifies significant barriers to healthcare in remote Indigenous communities, including limited availability of mobile clinics and difficulties accessing treatment and medicines.

The reports provide an opportunity to highlight the intersections between drug policy, Indigenous Peoples rights and gender-based violence, and to emphasise that responses to drug trafficking and drug use should not reinforce militarisation, territorial control or discrimination against Indigenous Peoples. Member States and civil society can call for health- and rights-based approaches, including accessible, culturally appropriate and non-discriminatory health, harm reduction and support services for Indigenous communities, particularly children and adolescents in remote areas, while ensuring that drug policies protect rather than undermine the sexual and reproductive health and rights of Indigenous women and girls.

ENHANCED ID WITH HIGH COMMISSIONER AND INTERNATIONAL INDEPENDENT EXPERT MECHANISM TO ADVANCE RACIAL JUSTICE AND EQUALITY IN LAW ENFORCEMENT

Item 9, 29 September at 3 PM GVA

The Expert Mechanism to Advance Racial Justice and Equality in Law Enforcement will present its thematic report ([A/HRC/63/72](#)), and its report on their visit to Colombia ([A/HRC/63/72/Add.1](#)), examining the human rights impact of the design and enforcement of drug laws and policies on Africans and people of African descent. The reports reconstruct how 'racism is embedded in drug control systems and address discriminatory impacts throughout the criminal justice system, including racial profiling, over-incarceration, excessive use of force, arbitrary arrest and detention, and harsher sentencing. They examine the historical and structural roots of systemic racism in drug policy, including the legacy of colonialism and enslavement and the racialisation of drug use, as well as factors that can exacerbate discriminatory enforcement, such as punitive drug control approaches, militarisation and surveillance technologies.

The High Commissioner will also present his report ([A/HRC/63/69](#)) on 'promotion and protection of the human rights and fundamental freedoms of Africans and of people of African descent against excessive use of force and other human rights violations by law enforcement officers through transformative change for racial justice and equality'. The report touches upon the disproportionate policing, sentencing and incarceration of people of African descent – including women - for drug-related offences, and calls for a paradigm shift and investment in racial justice and equality.

The Enhanced ID provides an opportunity for Member States and civil society to highlight evidence of racial discrimination and disproportionate impacts of drug law enforcement both generally and in the context of Colombia, as well as reforms and good practices, including decriminalisation, harm reduction, and alternatives to incarceration and punishment.

Interventions can also highlight the need for accountability, effective remedies and reparations for human rights violations, and for affected communities to have a meaningful role in the design, monitoring, and implementation of drug policies.

UNIVERSAL PERIODIC REVIEWS

Item 6, 24 – 28 September

The Council will consider and adopt the final outcomes of the reviews carried out at the 52nd UPR session on 4 – 15 May 2026 of the following countries: [Belgium](#), [Denmark](#), [Estonia](#), [Latvia](#), [Mozambique](#), [Namibia](#), [Niger](#), [Nicaragua](#), [Palau](#), [Paraguay](#), [Seychelles](#), [Sierra Leone](#), [Singapore](#), [Solomon Islands](#), and [Somalia](#).

The review of Singapore stands out for recommendations directly addressing the death penalty for drug offences. Singapore received several recommendations directly addressing this measure, including calls to: establish a moratorium on executions as a step towards abolition; end the automatic or mandatory imposition of the death penalty; repeal the death penalty for drug offences; and ensure that capital punishment is not applied to drug-related offences, which do not meet the threshold of “most serious crimes”. Recommendations also called for the commutation of existing death sentences for drug offences pending abolition. These recommendations are particularly significant given the continued use of capital punishment for drug offences in Singapore: as of 26 August 2026, 18 people were executed for drug offences in the country; more than those executed in the whole of 2025.

Sierra Leone received recommendations to ensure that people with drug dependence have access to evidence-based treatment and recovery services that comply with human rights standards, including alternatives to incarceration. The review also called for a comprehensive, human rights-based response to the “kush” crisis, encompassing prevention, treatment and social reintegration, as well as strengthened support for children affected by HIV/AIDS through integrated health and social services and by addressing barriers to care.

Seychelles received several recommendations addressing drug use and drug dependence, including calls to strengthen treatment and rehabilitation services, adopt a national detoxification policy, and intensify efforts to prevent and address drug use among children and adolescents. The review also called for addressing drug consumption from a public health and human rights perspective, alongside prevention and community-based approaches to drug use among young people.

Mozambique received a recommendation to strengthen efforts to prevent drug misuse and address drug consumption from a public health and human rights perspective. The review

further included a recommendation to improve the sustainability of the HIV response, alongside a recommendation concerning ratification of the Second Optional Protocol to the ICCPR and abolition of the death penalty.

Other countries received recommendations relevant to HIV/AIDS. Namibia received recommendations to strengthen rights-based sexual and reproductive health services, including HIV prevention, and to sustain HIV prevention and control efforts following the cessation of institutional funding from several donors. Palau received recommendations to strengthen implementation of its National HIV/STI Strategic Plan and to improve access to HIV testing, treatment, support and prevention. Niger was encouraged to improve access to and the quality of healthcare and increase health-sector budget allocations in line with WHO and Abuja Declaration recommendations on HIV/AIDS, tuberculosis and related infectious diseases.

The reviews of Niger, Palau, Somalia, Solomon Islands and Sierra Leone also included recommendations concerning abolition of the death penalty and/or ratification of the Second Optional Protocol to the ICCPR.

OTHER RELEVANT OPPORTUNITIES

- **OHCHR written update on Sri Lanka (Item 2, 7 September at 3pm GVA).** OHCHR will present its report on progress in reconciliation, accountability and human rights in Sri Lanka (A/HRC/63/18), soon to be available [here](#). The report is expected to reconstruct the human rights situation in Sri Lanka, and recommend steps to advance accountability and human rights. The General Debate following the update provides an opportunity to highlight persistent challenges related to drug policy and drug law enforcement in the country, including imposition of death sentences for drug offences, over-incarceration, and compulsory drug detention and treatment.
- **ID with the Special Rapporteur on contemporary forms of slavery and trafficking in persons (Item 3, 9 September at 10am GVA).** The Special Rapporteur will present a report on her visit to Brazil ([A/HRC/63/36/Add.1](#)). The report highlights the particular vulnerability of people of African descent, Indigenous Peoples and Quilombola communities, to exploitation and other human rights violations, including those arising from insecure land rights that expose these communities to encroachment by loggers, miners, agribusiness and criminal actors, including drug traffickers, particularly in the Amazon. These dynamics contribute to displacement, violence, environmental degradation and barriers to healthcare and justice. The report provides an opportunity to highlight how drug trafficking and responses to illicit economies can intersect with

existing inequalities, land rights violations and the marginalisation of Indigenous and other affected communities.

- **ID with the Special Rapporteur on the right to development (Item 3, 11 September at 12pm GVA).** The Special Rapporteur will present a report on his visit to Germany ([A/HRC/63/32/Add.1](#)). The report highlights concerns about the repression and defunding of civil society and community-led organisations representing marginalised populations, including people who use drugs and incarcerated people. The report notes the important role of these organisations in reaching vulnerable communities, delivering services and holding governments accountable, and highlights the need for development cooperation to safeguard their participation and rights. This provides an opportunity to emphasise the importance of protecting and meaningfully involving people who use drugs and other affected organisations in drug policy and development programmes.

SIDE EVENTS

More information on side events will soon be available [here](#).

Women, Girls and Drug Policies: Advancing a human rights approach

Mon 28 September at 1 pm GVA – Room TBC

This event, organised by OHCHR, will present key findings from OHCHR's report on the impact of drugs policies on women and girls; highlight promising practices and lessons learned in implementing human rights, health, gender sensitive and evidence-based drug policies; and provide a platform for strengthened dialogue between Council members, UN entities, affected communities and civil society.

Drug Control and Human Rights: from parallel universes to emerging convergence

Tue 29 September at 12 pm GVA – Room Concordia 1

This event, organised by Harm Reduction International, will examine the growing convergence between drug control and human rights over the past two decades. It will focus on how UN human rights mechanisms have increasingly addressed the harms caused by punitive drug policies; how communities and civil society can use UN human rights standards to strengthen advocacy; and what opportunities exist for Member States and UN mechanisms to advance coherent, rights-based drug policy.

Systemic Racism and Drug Policy Enforcement

Wed 30 September at 12 pm GVA - Room V, Building A and online

This event, co-hosted by the Expert Mechanism to Advance Racial Justice and Equality in Law Enforcement and OHCHR, will bring together representatives from Member States, UN entities, and civil society organizations to discuss the intersection of systemic racism and drug policy and law enforcement; building on the findings of the Expert Mechanism's report on the human rights impact of drug laws and policies on Africans and people of African descent. It will raise awareness of the negative human rights impacts of drug policies, disproportionately impacting marginalized racial and ethnic communities; take stock of promising practices; and, aim to promote human rights-, public health-, and racial justice-based implementation of drug laws and policy.

More information and registration here: <https://indico.un.org/event/1025480/>.

From Flawed Review to Real Change: Indigenous and peasants' rights and the future of the coca leaf

Thu 1 October at 1 pm GVA - Room Concordia 1 and online

This event, organised by the International Drug Policy Consortium, will provide a space for civil society, UN experts and government officials to discuss what's next for the coca leaf, including possible protection mechanisms for the plant and ongoing local-level initiatives from the Andean region, featuring the voices of Indigenous coca farmers.

Extra Punishment: Violence Against Women in the Fight Against Organized Crime

Thu 1 October at 2 pm GVA - Room Concordia 1

Across Argentina, Colombia, and Mexico, policies targeting organised crime impose extra punishment on women, extending well beyond those directly involved. Co-organised by Centro de Estudios Legales y Sociales (CELS), Dejusticia, Elementa and Mujeres Libres, this event will address how these policies exacerbate differential impacts on women at the stages of arrest, the judicial process, and incarceration, including through physical and sexual violence, extortion and infringement of the right to a defense, incrimination by association, and limitations on access to prison benefits and alternative measures. Panelists will also pause on how these policies, though described as exceptional, are in fact systematic and fail to consider gender-based factors and caregiving responsibilities, resulting in an extended punishment that harms women, their children, and their family networks.