**SUBMISSION**

**by the global commission on drug policy**

**to the Report by the Office of the High Commissioner**

**for Human Rights on human rights challenges in addressing and countering all aspects of the world drug problem**

In our 2011 report[[1]](#footnote-1) we – the [Global Commission on Drug Policy](https://www.globalcommissionondrugs.org) - called on global leaders to join an open conversation on drug policy reform. We recommended that they immediately discuss alternatives to the failed war on drugs. In subsequent reports we drew their attention to the urgent need for reform to reduce the devastating epidemics of HIV[[2]](#footnote-2) and Hepatitis C[[3]](#footnote-3). We asked policy makers to break the decades’ long taboo on talking about more effective and humane ways to manage drugs. We recognize that drug policy is a multifaceted issue, which needs to be drastically improved and to this end frameworks and actors can play an important role at different levels, i.e.: international[[4]](#footnote-4), national[[5]](#footnote-5), as well as local.[[6]](#footnote-6)

The Global Commission on Drug Policy recommends a comprehensive, scientific-, evidence-and human rights- based approach to drug policy. It needs to be bold but pragmatic. There is no one-size-fits-all pathway to enacting drug policy reform. We recognize that the shift will demand changes in domestic and international policy and practice. We are encouraged by the signposts that are emerging that can help governments and citizens take the right steps forward. They have momentum on their side, and can gather insights from the many positive developments around the world that have been increasingly occurring.

The Global Commission on Drug Policy has set out a roadmap for getting drugs under control. We recognize that past approaches premised on a punitive law enforcement paradigm have failed, emphatically so. They have resulted in more violence, larger prison populations, and the erosion of governance around the world. The health harms associated with drug use have gotten worse, not better.

The proposed “Five Pathways to Drug Policies that Work”[[7]](#footnote-7) are not a definite solution, but rather a roadmap for pragmatic policy change that we think can help address the world drug situation. The Pathways can be summarized as follows:

1. **PUT PEOPLE’S HEALTH AND SAFETY FIRST**

Instead of punitive and harmful drug prohibition, policies should prioritize the safeguarding of people’s health and safety – recognizing the fundamental right to health. This means investing in community protection, prevention, harm reduction, and treatment as cornerstones of drug policy. Put

munity safety first

**Recommendation:** **Putting people’s health first requires a fundamental reorientation of policy priorities and resources, from failed punitive enforcement to proven health and social interventions.** Policies should focus on reducing both drug-related harms such as fatal overdoses, HIV/AIDS, hepatitis and other diseases as well as drug prohibition related harms such as crime, violence, corruption, human rights violations, environmental degradation, displacement of communities, and the power of criminal organizations. Spending on counterproductive enforcement measures should be ended, while proven prevention, harm reduction and treatment measures are scaled up to meet needs.

1. **ENSURE ACCESS TO ESSENTIAL MEDICINES AND PAIN CONTROL**

The international drug control system is failing to ensure equitable access to essential medicines such as morphine and methadone, leading to unnecessary pain and suffering by millions of people. The political obstacles that are preventing member States from ensuring an adequate provision of such medicines has to be removed.

**Recommendation:** **Ensure equitable access to essential medicines, in particular opiate-based medications for pain.** More than 80 per cent of the world´s population carries a huge burden of avoidable pain and suffering with little or no access to such medications. This state of affairs persists despite the fact that the avoidance of ill health is a key objective and obligation of the global drug control regime. Governments need to establish clear plans and timelines to remove the domestic and international obstacles to such provision. They also should provide the necessary funding for an international program – to be overseen by the WHO and developed in partnership with the UNODC and the INCB – to ensure equitable and affordable access to these medicines where they are unavailable.

The issue of **access to controlled medicines** has gained in visibility at the UNGASS 2016 (its outcome document), reiterated in 2019 at the CND Ministerial Declaration, and with a more active WHO’s Expert Committee on Drug Dependence (ECDD). That said, almost no progress has been made to ensuring access to essential controlled medicines for the countless people living in countries with little or no access to palliative care or pain relief.[[8]](#footnote-8)

1. **END CRIMINALIZATION AND INCARCERATION OF PEOPLE WHO USE DRUGS**

Criminalizing people for the possession and use of drugs is wasteful and counterproductive. It increases health harms and stigmatizes vulnerable populations, and contributes to an exploding prison population. Ending criminalization is a prerequisite of any genuinely health-centered drug policy.

**Recommendation:** **Stop criminalizing people for drug use and possession – and stop imposing ‘compulsory treatment’ on people whose only offense is drug use or possession.** Criminalization has little to no impact on levels of drug use in an open society. Such policies do, however, encourage high risk behaviours such as unsafe injecting, deter people in need of drug treatment from seeking it, divert law enforcement resources from focusing on serious criminality, reduce personal and government funds that might otherwise be available for positive investment in people’s lives, and burden millions with the long-lasting negative consequences of a criminal conviction. Using the criminal justice system to force arrest for drug possession into ‘treatment’ often does more harm than good.

In **2018, the United Nations Common Position on Drugs** endorsed the decriminalization of drug use. Jurisdictions have, and are, adopting a decriminalization model.

In addition, the Global Commission on Drug Policy notes that the use of the **death penalty** for drug-related offences is incompatible with international standards including the International Covenant on Civil and Political Rights (ICCPR), which limits the imposition of death penalty only to the “most serious crimes”. [The International Narcotics Control Board (INCB) has encouraged States that impose the death penalty to abolish it for drug-related offences.](https://www.google.com/url?sa=i&rct=j&q=&esrc=s&source=web&cd=&ved=0CAIQw7AJahcKEwjw5aPQ6IP_AhUAAAAAHQAAAAAQAg&url=https%3A%2F%2Fwww.incb.org%2Fincb%2Fen%2Fnews%2Fpress-releases%2F2014%2Fpress_release_050314.html&psig=AOvVaw2UWcJ5IpAJd-d5CZjxV6qp&ust=1684669368409816)

1. **REFOCUS ENFORCEMENT RESPONSES TO DRUG TRAFFICKING AND ORGANIZED CRIME**

There is increasing recognition that drug law enforcement targeting people who use drugs and low-scale actors of the drug market exacerbates violence and fuels organized crime activities. A more targeted enforcement approach is needed in order to reduce the harms of the illicit drug markets and ensure peace and security.

**Recommendation: Rely on alternatives to incarceration for non-violent, low-level participants in illicit drug markets such as farmers, couriers and others involved in the production, transport and sale of illicit drugs.** Governments devote ever increasing resources to detecting, arresting and incarcerating people involved in illicit drug markets – with little or no evidence that such efforts reduce drug-related problems or deter others from engaging in similar activities. Community-based and other non-criminal sanctions routinely prove far less expensive, and more effective than criminalization and incarceration. Subsistence farmers and day laborers involved in harvesting, processing, transporting or trading who have taken refuge in this illicit economy purely for reasons of survival of their families should

not be subjected to criminal punishment. Only longer-term socio-economic development efforts that improve access to land and jobs, reduce economic inequality and social marginalization, and enhance security can offer them a legitimate exit strategy.

**Recommendation: Focus on reducing the power of criminal organizations as well as the violence and insecurity that result from their competition with both one and another and the State.** Governments need to be far more strategic, anticipating the ways in which particular law enforcement initiatives, particularly militarized ‘crackdowns’, may exacerbate criminal violence and public insecurity without actually deterring drug production, trafficking or consumption. The goals of supply-side enforcement need to be reoriented from unachievable market eradication to achievable reductions in violence and disruption linked to the trafficking. Enforcement resources should be directed towards the most disruptive, problematic and violent elements of the trade – alongside international cooperation to crack-down on corruption and money laundering. Militarizing anti-drug efforts is seldom effective and often counterproductive. Greater accountability for human rights abuses committed in pursuit of drug law enforcement is essential.

1. **REGULATE DRUG MARKETS TO PUT GOVERNMENTS IN CONTROL**

The legal regulation of drugs should be pursued because they are risky, not because they are safe. Different models of regulation can be applied for different drugs according to the risks they pose. In this way, regulation can reduce social and health harms and disempower organized crime.

**Recommendation:** **Allow and encourage diverse experiments in legally regulating markets in currently illicit drugs, beginning with but not limited to cannabis, coca leaf and certain novel psychoactive substances.** Much can be learned from successes and failures in regulating alcohol, tobacco, pharmaceutical drugs and other products and activities that pose health and other risks to individuals and societies. New experiments are needed in allowing legal but restricted access to drugs that are now only available illegally. This should include the expansion of heroin-assisted treatment for some long-term dependent users, which has proven so effective in Europe and Canada. Ultimately the most effective way to reduce the extensive harms of the global drug prohibition regime and advance the goals of public health and safety is to get drugs under control through responsible legal regulation.

1. <https://www.globalcommissionondrugs.org/reports/the-war-on-drugs> [↑](#footnote-ref-1)
2. <https://www.globalcommissionondrugs.org/reports/the-war-on-drugs-and-hivaids> [↑](#footnote-ref-2)
3. <https://www.globalcommissionondrugs.org/reports/the-negative-impact-of-the-war-on-drugs-on-public-health-the-hidden-hepatitis-c-epidemic> [↑](#footnote-ref-3)
4. <https://www.globalcommissionondrugs.org/position-papers/sustainable-development-agenda-position-paper> [↑](#footnote-ref-4)
5. <https://www.globalcommissionondrugs.org/position-papers/drug-policy-in-colombia> [↑](#footnote-ref-5)
6. <https://www.globalcommissionondrugs.org/position-papers/drug-policy-and-city-government> [↑](#footnote-ref-6)
7. <https://www.globalcommissionondrugs.org/the-five-pathways-to-drug-policies-that-work> [↑](#footnote-ref-7)
8. <https://www.globalcommissionondrugs.org/reports/time-to-end-prohibition> [↑](#footnote-ref-8)