
SUBMISSION

BY THE GLOBAL COMMISSION ON DRUG POLICY

TO THE SPECIAL RAPPORTEUR ON THE RIGHT TO HEALTH'S FORTHCOMING
THEMATIC REPORT TO THE HUMAN RIGHTS COUNCIL RE. "DRUG POLICIES
AND RESPONSES: A RIGHT TO HEALTH FRAMEWORK ON HARM REDUCTION".

Question 2: How do legal frameworks affect the harm reduction policies, programmes, and practices (whether related to drug use or otherwise) that are available in your community, country, or region? Are there laws or policies that either facilitate or serve as a barrier to adopting or implementing certain harm reduction policies, programmes, and practices? Aside from legal and regulatory barriers, are there other obstacles in place? Please provide specific examples.

Since its inception in 2011, the Global Commission on Drug Policy advocates for drug policies which are based on research evidence, human rights, health and well-being.¹

The Global Commission on Drug Policy recognizes that past approaches premised on a punitive law enforcement paradigm have failed - they have resulted in more violence, larger prison populations, and the erosion of governance around the world.

In 2014, the Global Commission proposed a roadmap for drug policy reform by means of its "Five Pathways to Drug Policies that Work".²

The first pathway is to 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 human right to health. This means investing in community protection, prevention, harm reduction, and treatment as cornerstones of drug policy. Providing both needle-syringe programs and opioid agonist treatment is a particularly effective approach. In Switzerland, which in the 1980s implemented the innovative "four pillars" approach (prevention, treatment, harm reduction and law enforcement) in response to a pronounced HIV epidemic among people who inject drugs, new HIV infections were essentially eliminated. A 2018 modelling study showed that were it not for these measures, Switzerland would have seen an additional 15,903 HIV infections and 5,446 AIDS deaths, reaching a peak HIV prevalence of 50.7%.³

¹ Global Commission on Drug Policy publications are available here:

<https://www.globalcommissionondrugs.org/reports>.

² <https://www.globalcommissionondrugs.org/the-five-pathways-to-drug-policies-that-work>.

³ Marzel A, Kusejko K, Weber R, Bruggmann P, Rauch A, Roth JA, et al. 'The cumulative impact of harm reduction on the Swiss HIV epidemic: Cohort study, mathematical model, and phylogenetic analysis' *Open Forum Infect Dis*. 2018 May 1;5(5), referred to in the Global Commission Drug Policy 2023 Report: "HIV, Hepatitis and Drug Policy Reform", embargoed until 22 November 2023.

Drug control efforts must be centered on human rights, including the fundamental right to health. Everyone, including people who use drugs, has the right to the highest attainable standard of physical and mental health, a right long enshrined in international human rights law. This means that governments have an obligation to ensure that people who use drugs have safe, effective access to prevention, testing and treatment services, including harm reduction services, which should be adequately funded, appropriate for their needs and circumstances, and respectful of human dignity.⁴ This is also intimately linked to the Global Commission on Drug Policy’s second pathway: to 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 avoidable pain and suffering by millions of people: more than 80 per cent of the world’s population has either no or insufficient access to or safe use of these medicines.⁵ Governments need to establish clear plans and timelines to remove the domestic and international obstacles to such provision.

Question 5: What type of harm reduction policies, programmes, and practices, as well as mental health and other support (e.g., housing, legal, social, educational, and economic), are available for people who use drugs in the community, institutions, or detention facilities? Please share examples of the impact of criminalisation, discrimination, stereotypes and stigma on the different groups of the population e.g., persons in situation of homelessness, migration, or poverty, sex workers, women, children, LGBTIQ+ persons, persons who are detained or incarcerated, persons with disabilities, Indigenous Peoples, Black persons, persons affected by HIV or hepatitis, and persons living in rural areas, etc.).

Ending the criminalization and incarceration of people who use drugs - the third of the Global Commission’s suggested drug policy reform pathways⁶ - is a prerequisite of any genuinely health-centered drug policy. Criminalizing people for the possession and use of drugs increases health harms. For example, criminalization is associated with substantial increases in the risk for HIV and hepatitis C (HCV) infection among people who inject drugs.⁷

Criminalization is the state-sanctioned stigmatization of, and discrimination against, people who use drugs⁸ and contributes to an exploding prison population. Due to the criminalization of drug use, people who use drugs are far more likely to encounter the criminal justice system: among people who inject drugs, 42% had been arrested, while 29% had been incarcerated in the previous 12 months.⁹

⁴ Global Commission Drug Policy 2023 Report: “HIV, Hepatitis and Drug Policy Reform”, embargoed until 22 November 2023.

⁵ World Health Organization. Briefing Note: Access To Controlled Medications Programme. Geneva: WHO; 2008.

⁶ <https://www.globalcommissionondrugs.org/the-five-pathways-to-drug-policies-that-work>.

⁷ Stone J, Fraser H, Lim AG, Walker JG, Ward Z, MacGregor L, et al. ‘Incarceration history and risk of HIV and hepatitis C virus acquisition among people who inject drugs: a systematic review and meta-analysis’ *Lancet Infect Dis*. 2018 Dec 1, 18(12):1397–409, available [here](#), and referred to in the Global Commission Drug Policy 2023 Report: “HIV, Hepatitis and Drug Policy Reform”, embargoed until 22 November 2023.

⁸ Global Commission Drug Policy 2023 Report: “HIV, Hepatitis and Drug Policy Reform”, embargoed until 22 November 2023.

⁹ Degenhardt L, Webb P, Colledge-Frisby S, Ireland J, Wheeler A, Ottaviano S, et al. Epidemiology of injecting drug use, prevalence of injecting-related harm, and exposure to behavioural and environmental risks among people who

In 2018, the UN System Chief Executives Board endorsed the decriminalization of drug use in in the United Nations [Common Position on Drugs](#). As governments have become more aware of the complexities of drug-related situations, and options for policy responses in their own territories, many are opting to use the flexibilities within the Conventions and are adopting decriminalization initiatives and implementing harm reduction programs and services.¹⁰

Along with decriminalisation, it is important to refocus law enforcement responses to drug trafficking and organized crime – the fourth of the Global Commission’s pathways for drug policy reform. In recent years, there has been increasing recognition that law enforcement targeting people who use drugs and low-scale actors of the drug market exacerbates violence and fuels organized crime activities. Furthermore, greater accountability for human rights violations committed in pursuit of drug law enforcement is essential.

In conclusion, the legal regulation of drugs – the last of the five pathways suggested by the Global Commission – provides a way to bring together the four avenues referred to above. By building on the progress in harm reduction, treatment of drug dependence, access to controlled medicines and decriminalization models, legal regulation can ultimately reduce social and health harms, while disempowering organized crime and upholding the human rights of all.

inject drugs: a systematic review. *Lancet Glob Health*. 2023 May 1;11(5):e659–72, referred to in Global Commission Drug Policy 2023 Report: “HIV, Hepatitis and Drug Policy Reform”, embargoed until 22 November 2023.

¹⁰ <https://www.globalcommissionondrugs.org/reports/the-war-on-drugs>, page 8.