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Promotion and protection of all human rights, civil,
political, economic, social and cultural rights,
including the right to development

Summary of the intersessional panel discussion on human rights challenges in addressing and countering all aspects of the world drug problem

Report of the Office of the United Nations High Commissioner for Human Rights

Summary

The present report is submitted pursuant to Human Rights Council resolution 52/24 and provides a summary of the intersessional panel discussion on human rights challenges in addressing and countering all aspects of the world drug problem. The intersessional panel discussion was held by the Human Rights Council on 5 February 2024.



I. Introduction

1. The Human Rights Council, in its resolution 52/24, decided to convene an intersessional panel discussion before its fifty-fifth session on human rights challenges in addressing and countering all aspects of the world drug problem, informed by the findings contained in the report on the same topic¹ prepared by the Office of the United Nations High Commissioner for Human Rights (OHCHR), in order to have a constructive and inclusive dialogue on this issue with relevant stakeholders, including the United Nations Office on Drugs and Crime (UNODC), specialized agencies of the United Nations system, civil society and affected populations, and with the participation of the Commission on Narcotic Drugs.
2. The Human Rights Council held the intersessional panel discussion on 5 February 2024. To ensure the broadest participation of stakeholders possible, the intersessional panel discussion was held in an accessible format,² with interpretation in all United Nations languages, and was webcast and recorded.³
3. The objectives of the panel discussion were to discuss the specific human rights challenges in addressing and countering all aspects of the world drug problem and to consider the implementation of key recommendations highlighted in the report.
4. The panel discussion was chaired by the President of the Human Rights Council, Omar Zniber. Opening statements were delivered by the United Nations High Commissioner for Human Rights, Volker Türk, and by the Chair of the sixty-seventh session of the Commission on Narcotic Drugs, Philbert Johnson, of Ghana. Following the opening statements, four panellists made presentations: the Deputy Executive Director and Assistant Secretary General of the Joint United Nations Programme on HIV/AIDS (UNAIDS), Christine Stegling; the Director of the Division for Policy Analysis and Public Affairs of UNODC, Jean-Luc Lemahieu; the Executive Director of the International Drug Policy Consortium, Ann Fordham; and the Commissioner of the Global Commission on Drug Policy, Adeeba Kamarulzaman.⁴ After the presentations, there was an interactive dialogue, composed of two segments, which consisted of interventions from 27 States⁵ and six non-governmental organizations. Lastly, the panellists responded to questions posed during the dialogue and provided their concluding remarks.

II. Opening statements

5. The United Nations High Commissioner for Human Rights opened the panel discussion by highlighting the importance of placing human rights at the centre of all policies that tackled the world drug problem. He encouraged the Human Rights Council to continue its engagement on the topics related to the world drug problem and to infuse a human rights dimension into all forums where these issues were addressed. In his opening statement, the High Commissioner underlined the importance of convening the panel discussion at this time, considering the upcoming midterm review of the 2019 Ministerial Declaration, as it could provide an opportunity to recommend changes to drug policies over the next five years, including by strengthening their advancement of human rights and by making them more effective.
6. In his remarks, the High Commissioner referred to the report on human rights challenges in addressing and countering all aspects of the world drug problem⁶ prepared by OHCHR, which addressed various human rights challenges, including the human rights

¹ [A/HRC/54/53](#).

² The meeting was accessible to persons with disabilities through the provision of International Sign interpretation and real-time captioning, along with other accessibility measures.

³ The video recording is available at <https://webtv.un.org/en/asset/k1b/k1bz8q5pmc>.

⁴ Opening statements and statements made by panellists are available at <https://waps.ohchr.org/en/hr-bodies/hrc/intersessional-panel-discussion-drug-policy>.

⁵ Statements of the States can be accessed at <https://hrcmeetings.ohchr.org/HRCSessions/RegularSessions/Pages/Statements.aspx?SessionId=74&MeetingDate=05/02/2024%2000%3a00%3a00>.

⁶ [A/HRC/54/53](#).

impact of the so-called “war on drugs” and the militarization of drug control; compulsory drug treatment; overincarceration and related prison overcrowding; use of the death penalty for drug-related offences; and unequal access to treatment and harm reduction.

7. The High Commissioner drew attention to the positive developments in the drug policies highlighted in the report, which were better grounded in public health and human rights-based approaches. He noted the global efforts to move away from the death penalty for drug offences and pointed out several positive national initiatives aimed at shifting away from punitive approaches, by decriminalizing drug use and possession, setting up alternatives to incarceration, and broadening harm reduction. He cited the positive example of the United Kingdom of Great Britain and Northern Ireland, where Scotland had recently published a draft outline of its Charter of Rights for People Affected by Substance Use, which was firmly grounded in the International Guidelines on Human Rights and Drug Policy and nourished by community consultations. He recalled the significant human rights-based changes to the drug policies implemented by Colombia, with a focus on prosecuting those who benefited most from criminal activity and dismantling criminal networks while protecting vulnerable people from harm. Furthermore, the High Commissioner referred to the positive developments in Pakistan, which had recently ended capital punishment for drug-related offences, and in Malaysia, which had ended the mandatory death penalty for drug offences. He also welcomed the developments in India and Mexico, where legal reforms had emphasized alternatives to incarceration in certain cases. Finally, the High Commissioner referred to the legislative changes in Ghana in the direction of a public health-friendly drug policy.

8. Building on these positive developments, the High Commissioner encouraged all relevant stakeholders to move away from an ineffective and harmful emphasis on prohibition and punishment in drug policies, while introducing decriminalization of drug usage as a powerful step forward. He noted that drug policies must include evidence-based and gender-sensitive approaches to harm reduction and be part of broader efforts to end racial and gender discrimination in policing and criminal justice systems. Furthermore, he stated that harm reduction services could have a very positive impact on drug users and communities, although they needed to uphold the rights of people who used drugs, including those who injected drugs and who may develop infectious diseases, such as HIV and AIDS. The High Commissioner insisted that all treatment for drug dependence must be voluntary and be provided by qualified health professionals.

9. Finally, the High Commissioner reinforced the need for measures that could take control of illegal drug markets, such as responsible regulation, which could eliminate profits from illegal trafficking, criminality and violence. He highlighted the importance of meaningful consultations with all relevant parties, such as people who used drugs, and with affected communities, including farmers, women, Indigenous Peoples and young people, as well as with civil society organizations, for effective design, implementation and evaluation of all policies on drugs. The High Commissioner invited all actors to engage with OHCHR, special procedures of the Human Rights Council, and relevant United Nations colleagues for expert advice on human rights-based approaches to these issues, in line with the United Nations system common position supporting the implementation of the international drug control policy through effective inter-agency collaboration.

10. In his opening video statement, the Chair of the sixty-seventh session of the Commission on Narcotic Drugs, Mr. Johnson, stressed the role of the Commission on Narcotic Drugs as the central policymaking body within the United Nations system for addressing all aspects of the world drug problem. The Commission’s work included strong commitments to uphold the respecting, promoting and protecting of human rights and fundamental freedoms in Member States’ efforts, and to ensure that all people could live in health, dignity and peace, with security and prosperity. In his remarks, Mr. Johnson mentioned the upcoming midterm review of the 2019 Ministerial Declaration, which would include the adoption of an outcome document at the opening of the high-level segment, focusing on taking stock and on accelerating action to address the challenges identified in the 2019 Ministerial Declaration. He noted that one such challenge specifically addressed the compliance of drug policies with international human rights obligations and the international drug control conventions. In his statement, he drew attention to his Pledge4Action initiative,

aimed at mobilizing Member States to pledge concrete and impactful actions for challenges outlined in the 2019 Ministerial Declaration, which would provide a platform for spotlighting specific areas in relation to the world drug problem during the upcoming review. Mr. Johnson reiterated the need to work together constructively to find solutions. He recalled that the Commission on Narcotic Drugs provided the forum for addressing all aspects of the world drug problem, and underscored the importance of stakeholders' engagement and the value of contributions received from Geneva, in the context of the thematic discussions during which participants shared experiences and expertise, lessons learned and good practices in the implementation of international drug policy commitments. Lastly, he stressed the importance of interventions and contributions provided by OHCHR, including during the Commission's thematic discussions. He stressed that the world drug problem was a complex challenge that required a multidimensional approach to ensure that Member States adopted well-informed policy decisions.

III. Summary of the panel discussion

A. Contributions of panellists

11. The Deputy Executive Director and Assistant Secretary General of UNAIDS, Christine Stegling, began her remarks by commending the United Nations High Commissioner for Human Rights for an excellent and timely report. Ms. Stegling underlined the persistent inequalities in the global efforts to respond to the AIDS pandemic, where people who used drugs were often left behind in the HIV response. She stressed that ending AIDS as a public health threat by 2030 required a radical change in the approach to drug policy, in line with many of the recommendations outlined in the OHCHR report. In eight out of 14 countries that reported data to UNAIDS, more than 10 per cent of people who injected drugs avoided health-care services due to the stigma they faced. Referring to 145 countries around the world that still criminalized the use or possession of small amounts of drugs, Ms. Stegling stated that drug prohibition had failed, while criminalization had reflected, exacerbated and perpetuated societal stigma and discrimination beyond legal sanctions. Furthermore, she stressed that decriminalization of drug use was critical to ensuring the right to health of people who injected drugs, including by guaranteeing their access to HIV services.

12. Ms. Stegling emphasized that harm reduction programmes, particularly needle and syringe programmes and opioid agonist therapy, were crucial in the HIV response. However, those programmes were underfunded and unavailable to most people who injected drugs or not available at scale. As an example, Ms. Stegling noted that in 2019, UNAIDS had reported that only 1 per cent of people who injected drugs lived in countries with the recommended coverage of needle and syringe programmes and opioid agonist treatment. That figure had not substantially changed in the past five years. Ms. Stegling underlined the importance of adopting gender-sensitive drug policies that responded to the specific needs of women, in line with the recommendations of the OHCHR report. She stated that according to UNAIDS data from 16 countries, women who injected drugs experienced double the risk of acquiring HIV, due to gender norms, inequalities, sexual violence and engagement in unsafe sex work. Finally, she pointed to participation as the core principle of a human rights-based approach, underlining that people who used drugs must not just be included but must lead the response. She noted that UNAIDS research had shown that peer involvement in harm reduction services led to reduced HIV incidence and prevalence, increased service access, acceptability and quality, changed risk behaviours, and reduced stigma and discrimination. Ms. Stegling concluded by urging everyone to incorporate the findings of the OHCHR report in their discussions. She stressed that despite positive progress made by some countries, for example the decriminalization of drug use, the implementation of harm reduction programmes and the involvement of civil society in drug policy, there was much work ahead – work that must take place across the different hubs in Vienna, Geneva and New York founded on human rights, and particularly on the right to health.

13. The Director of the Division for Policy Analysis and Public Affairs of UNODC, Mr. Lemahieu, began his remarks by thanking Ms. Stegling for her appeal for more funding

and the scaling up of programmes on harm reduction and drug use. He underlined that respecting, protecting and promoting all human rights, fundamental freedoms and the inherent dignity of all individuals and the rule of law was crucial in the development and implementation of drug policies at all levels, and that the international community had continuously stressed that to effectively address and counter the world drug problem, any policy or action must respect and preserve those rights. Mr. Lemahieu recalled that protecting the health and welfare of individuals and society was the fundamental aim of the three international drug conventions, which, as a source of international public law, represented a commitment by States parties to implement obligations arising from them, mindful of other obligations, including international human rights law. He noted that the world drug problem was a complex, multifaceted and constantly developing issue, which required the responses to be based on science and reliable data. He noted that while drug potency regarding the proliferation of synthetic drugs and their major threat to health had gone up, the risk perception had decreased. Mr. Lemahieu also highlighted issues that contributed to the challenges in developing the most effective responses to this problem, including the Internet and the growing vulnerability of the global South.

14. In his remarks, Mr. Lemahieu highlighted the right of the child to be protected from drug use and associated disorders, grounded in the Convention on the Rights of the Child. He emphasized that children were particularly vulnerable to the negative health and social consequences of substance and drug use, and that the earlier children started to use substances, the more likely they would be to develop mental health disorders, including substance use disorders. To address this challenge, UNODC had launched a new initiative in 2023 called CHAMPS (Children Amplified Prevention Services) and pledged to promote the right to health of 10 million children vulnerable to starting to use drugs by amplifying their resilience in 10 countries in the next five years. He expressed hope that early prevention of drug use, among children and young people, and other vulnerable populations, would be part of future human rights discussions related to the world drug problem, including by the relevant treaty bodies in Geneva, and said that UNODC stood ready to provide expertise and scientific evidence.

15. Mr. Lemahieu also highlighted the right to health, as set out in the Universal Declaration of Human Rights, and the need to ensure access to essential medicines to improve quality of life, without avoidable and treatable pain. The Single Convention on Narcotic Drugs of 1961 and the Convention on Psychotropic Substances of 1971 provided a timeless and science-based foundation for the realization of that right; Mr. Lemahieu noted the scheduling system, which had been designed to respond to the evolution of scientific knowledge on drugs, their liability to abuse, their dependence potential and their value in therapeutics. He also pointed out the recommendation in the OHCHR report regarding the development of a regulatory system for legal access to all controlled substances and clarified that this meant the establishment of national systems to ensure the availability of and access to controlled substances for medical and scientific purposes, which was an obligation of all States parties to the Conventions. Finally, Mr. Lemahieu touched upon relevant thematic areas that UNODC was involved in: this included prison reform work that contributed to the prevention of torture and inhuman or degrading treatment; legislative and policy advice, training and capacity-building, which focused on alternative measures to conviction and punishment; and the rehabilitation and reintegration of offenders and young people in conflict with the law.

16. The Executive Director of the International Drug Policy Consortium, Ann Fordham, spoke on behalf of a global network of more than 190 non-governmental organizations from over 75 countries who had come together to promote drug policies grounded in human rights and social justice. She stated that the harms caused by decades-long drug policies based on prohibition, criminalization and harsh punishment needed to be repaired by making sure that civil society and community organizations played a central role in bringing forward evidence and lived experience to inform and shape drug policies. Considering the midterm review of the 2019 Ministerial Declaration, Ms. Fordham highlighted a shadow report submitted by the International Drug Policy Consortium, which concluded that little to no progress had been made by the international community in addressing the 12 challenges identified in the Declaration. In support of her statement, she mentioned the thriving illegal drug market, militarized responses that fuelled violence and conflict, poor access to harm reduction,

treatment and other support services, and worsened human rights impacts of drug control, such as the use of the death penalty, extrajudicial killings, and arbitrary arrests and detention, among others.

17. Ms. Fordham welcomed Human Rights Council resolution 52/24, which had broken the taboo on harm reduction and had recognized the centrality of gender, Indigenous Peoples' rights and racial justice in drug policy debates. She highlighted the significance of the OHCHR report, which had been welcomed by a joint statement of 134 non-governmental organizations urging Member States to take on board the report's recommendations. Among some positive developments around drug policies, Ms. Fordham noted the decriminalization of drug use and possession for personal use by 66 jurisdictions in 40 countries, and the increased threshold of over 300 million people living in legal systems that had regulated drugs, such as cannabis, for recreational use. Furthermore, she stressed the importance of the request brought forward by the Plurinational State of Bolivia to the World Health Organization for a critical review of the status of the coca leaf under the drug control conventions, which could end the global prohibition on the coca leaf and, therefore, reinstate the rights of Indigenous Peoples that had used that plant for centuries. Finally, Ms. Fordham underlined the positive contributions of the human rights mechanisms to this topic, which included the upcoming release of the report on drug policy from a harm reduction perspective by the Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health, as well as the ongoing efforts for the adoption of the general comment on drug policy by the Committee on Economic, Social and Cultural Rights. She encouraged the Human Rights Council to move towards the development of a special procedure mandate on human rights and the world drug situation, given the scale of the human rights impacts associated with the world drug situation – more than half a million drug-related deaths per year, and around 20 per cent of the global prison population being incarcerated for drug crimes.

18. The Commissioner of the Global Commission on Drug Policy, Adeeba Kamarulzaman, began her statement by underlining that the actual number of people who used drugs had increased by 23 per cent over the past decade, with an estimate of 296 million people in 2021, contrary to the intentions of drug prohibition. She stated that demographic factors projected the number of people using drugs around the world to rise by 11 per cent by 2030. Ms. Kamarulzaman noted with concern the continued deployment of compulsory treatment services as a purported alternative to incarceration for drug-related offences, which were not based on scientific evidence and violated an array of human rights. She stressed the negative impacts of the further restrictions made by the international drug control system on the access to and availability of essential medicine for pain relief and palliative care, which led to the unnecessary suffering of millions of people, including children.

19. Ms. Kamarulzaman encouraged States to consider the responsible legal regulation of drugs as a sound and effective pathway to undermine organized crime, which could subsequently liberate resources to counter its root causes and mitigate any anticipated changes in organized crime activity. She suggested that such legal regulation could be done by means of incremental regulation of lower-potency drugs. She called on States to learn in this area from successes and failures in the regulation of alcohol, tobacco and pharmaceutical drugs. Concerning the transition from drug prohibition to legal regulation, Ms. Kamarulzaman stressed that there was no "one size fits all" approach and that each country or jurisdiction had to design a strategy fit for its own circumstances. Finally, Ms. Kamarulzaman called for cementing the link between human rights and drug policy by making drug policy a standing item on the Human Rights Council agenda and by giving this topic a specific mechanism of its own through the introduction of a special procedure mandate holder on human rights and drug policy.

20. The Chair of the panel discussion, and President of the Human Rights Council, Mr. Zniber, reiterated that the global community was faced with a very serious issue with the drug problem, which had deleterious consequences at the global level both in terms of health and in terms of security and other relevant matters. He underlined the important remit of UNAIDS and its efforts to combat the effects of drugs, especially in the field of health care. He also thanked the UNODC representative for the overview of the world drug problem, in

addition to the various activities that the organization had been carrying out in that field. Finally, the Chair highlighted the relevant assessments presented by the representatives of the International Drug Policy Consortium and the Global Commission on Drug Policy and thanked them for their commitment to involve members of civil society and the community in all aspects of drug policy, as well as for their specific proposals put forward for consideration and discussion at the panel.

B. Interactive discussion

21. During the interactive discussion, interventions were made by representatives of the following Member States: Algeria, Australia, Belarus, Bolivia (Plurinational State of), Brazil, Chile, China, Colombia, Cuba, Egypt, France, Iran (Islamic Republic of), Iraq, Malaysia, Mexico, Morocco, Netherlands (Kingdom of the), Panama, Paraguay, the Russian Federation, Singapore (on behalf of a group of States),⁷ Singapore, South Africa, Switzerland (on behalf of a group of States),⁸ Switzerland and Viet Nam, as well as by a representative of the European Union.

22. Contributions were also made by representatives of non-governmental organizations, including Alliance internationale pour la défense des droits et des libertés, Amnesty International; Skoun Lebanese Addiction Centre, on behalf of the International Drug Policy Consortium; the International Harm Reduction Association; the International Network of People who Use Drugs; and Transform Drug Policy Foundation.

23. Some speakers welcomed the OHCHR report and called for increased commitment by stakeholders and States to adopt drug policies based on public health and human rights. Some States urged all Member States to implement the key recommendations presented in the report, while others expressed their concern over the lack of balance and incompatibility with international law. Some non-governmental organizations suggested that States use the report's recommendations as a road map for adopting drug policies that put protection of people's health and rights at the centre. Some States called upon Member States to aim for a progressive and human rights-based midterm review of the 2019 Ministerial Declaration, while one State encouraged the recommendations contained in the report to be considered in the outcome document to be produced following the high-level segment of the sixty-seventh session of the Commission on Narcotic Drugs.

24. Many States highlighted the importance of a comprehensive approach to the world drug problem that balanced health and law enforcement policies and was based on scientific evidence and human rights, ensuring the health of individuals, families and communities, public safety and security, and sustainable and viable livelihoods, and that promoted effective international cooperation. This approach was to be based on the three international drug conventions and international human rights law and was to be in line with international drug policy commitments, respecting national law and policies. Many States urged the setting of ambitious goals in addressing drug-related challenges, rather than limiting efforts to reducing harms related to drug abuse. In this regard, many States reaffirmed their determination to address and counter the world drug problem to ensure that all people lived in peace, prosperity, dignity and security.

25. Many States also stressed that the current developments related to the world drug problem were alarming and represented a global drug crisis. Two States referred to the *World Drug Report 2023* prepared by UNODC, which highlighted the disturbing number of people who used drugs (around 13 million) and the ever-growing supply of illicit drugs, and also reiterated the need to mobilize against the global drug problem in the context of rapid and

⁷ On behalf of Algeria, Azerbaijan, Bahrain, Bangladesh, Belarus, Brunei Darussalam, Cameroon, Central African Republic, China, Cuba, Democratic People's Republic of Korea, Egypt, Eritrea, Gambia, India, Indonesia, Iran (Islamic Republic of), Iraq, Jordan, Kuwait, Lao People's Democratic Republic, Libya, Myanmar, Nigeria, Oman, Pakistan, Qatar, Russian Federation, Saudi Arabia, Singapore, Sri Lanka, Sudan, Syrian Arab Republic, Tajikistan, Türkiye, United Arab Emirates, United Republic of Tanzania, Venezuela (Bolivarian Republic of), Zimbabwe and State of Palestine.

⁸ On behalf of the core group of Albania, Brazil, Colombia, Greece, Guatemala, Mexico, Paraguay, Portugal, Switzerland and Uruguay.

profound change. Some States pointed out the negative impacts of drugs on public health, including addiction, overdoses, mental health issues and the transmission of AIDS. To address the current challenges, many speakers stressed the importance of adopting a comprehensive, balanced and human rights-based approach to drug policies with a focus on protecting the rights and dignity of individuals affected by drug-related issues, while ensuring effective law enforcement to counter drug-related crime. Some States noted the progress made in countries that supported the development and implementation of balanced, evidence-based policies and interventions, which addressed discrimination and reduced the stigma towards persons who used drugs in order to ensure voluntary access to drug-related services.

26. The discussion also emphasized the significance of promoting public health in addressing drug-related challenges, which involved focusing on prevention, harm reduction and the provision of accessible treatment services. Some speakers noted that harm reduction measures were a crucial remedy to stop the spread of HIV infections and AIDS and to allow for the availability, accessibility and coverage of treatment services without stigma as well as for alternative measures to conviction and punishment in cases of appropriate nature in accordance with the three international drug control conventions. One State called for the introduction of alternative measures for the rehabilitation of drug users through community-based programmes and aftercare initiatives and highlighted the need for the integration of medical treatment to address drug dependency. It was emphasized that treatment of drug use disorder must be voluntary and depend on informed consent. Some States raised the concern of insufficient access to and availability of internationally controlled substances for medical purposes in developing countries.

27. Some States recalled that the shift from punitive approaches towards an international drug policy that put human rights and public health at the centre required continued attention and joint commitment. Such a shift was said to be more compelling considering the recent rise of synthetic drugs, which posed new challenges while the old ones remained. One State argued that the oversimplification and narrowing of the scope of the world drug problem, as primarily a health and human rights issue, ignored its criminal justice dimensions, deepened polarization and undermined the search for a comprehensive solution. Some speakers shared concerns about human rights violations associated with the so-called “war on drugs”, including extrajudicial killings, mass incarceration and arbitrary detention, as well as the use of the death penalty for drug-related offences, which was inconsistent with international human rights law and lacked conclusive evidence that it was an effective deterrent. One State raised concerns that executions for drug-related offences accounted for one in three of all executions carried out globally, while a civil society organization referred to the global mapping showing that 450 drug-related executions had been reported in 2023. One State welcomed the positive development in advancing human rights-based drug policies included in the OHCHR report and invited other States to share their own experiences regarding combating drug trafficking while upholding human rights.

28. Three non-governmental organizations welcomed the recommendation of the OHCHR report for the decriminalization and responsible regulation of drugs while pointing to the failure of prohibitionist policies to decrease the use and availability of drugs, resulting in undermined rights of millions of people and exacerbated risks and harms of drug use in general. However, many States expressed concern and opposition to these recommendations of OHCHR, and reiterated that drug liberalization and decriminalization did not consider the diverse context of the world drug problem, which required tailored responses for each country, and instead created misperceptions of the harmful consequences of illicit drug use, especially for young people but also for international stability, peace, the environment and public health. Two States noted that the recommendations of the OHCHR report in this area could harm the rights of children, as they did not consider article 33 of the Convention on the Rights of the Child on protecting children from the illicit use of narcotic drugs and psychotropic substances. A few States also recalled that those recommendations directly contradicted the legal obligations of States under the three international drug conventions of 1961, 1971 and 1988. To that end, it was reiterated that only a holistic approach anchored in those conventions could lead to sustainable policies that respected human rights.

29. Several speakers highlighted the recent positive developments in drug policies discussed in the report, including the stronger involvement of civil society. One non-governmental organization particularly welcomed the special attention given in the report to the people who used drugs in humanitarian and crisis settings, as that issue was regularly left behind in humanitarian responses. The same non-governmental organization urged Member States to address the specific vulnerabilities of people who used drugs in crisis settings by continuing harm reduction interventions and substance use treatment in crisis settings and conflicts and by prioritizing drug treatment as part of emergency response planning.

30. Some non-governmental organizations expressed concerns regarding the disproportionate impact of current drug policies on vulnerable and marginalized groups, including Indigenous Peoples, people of African descent, those in lower socioeconomic conditions, and others in situations of vulnerability. Speakers emphasized the need to address structural racism and discrimination in drug policy design and implementation and to tailor all drug-related responses to the needs of marginalized communities. One State had reaffirmed its commitment to upholding the rights of the Indigenous people by starting a strong campaign against the stigmatization of the use of natural coca leaf and appealing to the World Health Organization for a critical review of coca leaf.

31. Recalling the complex and multifaceted nature of the world drug problem, many States stressed the leading role of specialized United Nations entities and forums with relevant technical expertise in dealing with drug-related issues, in particular the Commission on Narcotic Drugs as the policymaking body of the United Nations with prime responsibility for drug-related matters, and UNODC, as well as the International Narcotics Control Board and the World Health Organization, within their treaty-mandated roles. Building greater synergies among different United Nations agencies to address the world drug problem efficiently, including by consolidating joint efforts with regional bodies, civil society and academia, was stressed by one State. Coordinated and integrated international cooperation among countries of origin, transit and destination was also highlighted as a crucial prerequisite for addressing substance abuse, drug addiction and drug trafficking, which had had a profound negative impact on societies, and on young people in particular. Two non-governmental organizations urged States to ensure that human rights were at the centre of international drug policies by bringing Human Rights Council resolution 52/24 to the attention of the Council every two years and by establishing a special procedure mandate on human rights and the world drug problem. They also encouraged human rights treaty bodies and other relevant human rights agencies to continue the development of relevant recommendations to support States to reform their drug-related policies.

IV. Concluding remarks

32. **In her concluding remarks and responses to questions raised during the discussion, Ms. Kamarulzaman addressed the issue of the impact of the world drug problem on children. While referring to the need to protect children and young people from drugs, she noted that recommendations of the international agreements rarely extended beyond the prevention of drug use and age-appropriate drug treatment, which did not represent the full range of issues that children encountered and experienced. She stressed that the punitive approach towards the drug issue brought forth many harms, including displacement, food and income insecurity, health-related harms and violence associated with crop eradication. Among the impacts of such harms on children, Ms. Kamarulzaman drew attention to the following: loss of children's parents due to incarceration; spending of children's early years in prison with their mothers; growing up within communities subjected to intense street-level policing or gang violence; random testing for drugs at school, including strip searches and sniffer dogs; pulling of children into the criminal justice system; the forcing of children into drug treatment; and many others. She stressed that the publication of the report by OHCHR, and the organization of the intersessional panel discussions, represented a growing recognition within international forums of the importance of addressing all such aspects of the world drug problem while operationalizing a human rights-based approach to**

drug control. Finally, Ms. Kamarulzaman emphasized the importance of making drug policy a standing item on the Human Rights Council agenda and providing this subject with a specific mechanism, such as a special procedure mandate holder on human rights and drug policy.

33. Ms. Fordham began her concluding remarks by addressing the question related to discussions of drug policies outside of the Vienna setting. She stressed that while the Commission on Narcotic Drugs was the policymaking body with the prime responsibility for drug policy at the United Nations, the Commission's resolutions and the 2019 Ministerial Declaration welcomed and called for contributions from all relevant United Nations entities, including the United Nations human rights bodies. In this regard, she noted that the Human Rights Council and OHCHR had a mandate to promote the enjoyment of all human rights by all people, including people who used drugs, as had been recognized by many treaty bodies and special procedures by incorporating this issue into their reports and recommendations. While addressing the issue of a coherent approach to drugs across the United Nations system, Ms. Fordham drew attention to the United Nations system common position supporting the implementation of the international drug control policy through effective inter-agency collaboration, adopted in 2018 under the leadership of the Secretary-General of the United Nations, which committed all United Nations entities to promote drug policies centred on health and human rights. This should include promoting the abolition of the death penalty, harm reduction strategies, and decriminalization of drug use and possession for personal use. As an example of the involvement of the Council's special procedures in drug policy, Ms. Fordham mentioned the statement released by 16 special procedure mandate holders on World Drug Day in 2023 calling for an end to punitive approaches to drug control.

34. Despite such wide involvement of already existing special procedures and due to the gravity of the situation, Ms. Fordham reiterated the need for a new special procedure mandate specifically focused on drug policy and human rights. In response to the issue of regulation and decriminalization, Ms. Fordham commended the recommendation to Member States, in the OHCHR report, to consider legal regulation of drugs for non-medical purposes, given the widespread human rights violations associated with prohibition. She cited Germany, Malta and Uruguay as examples of States that had framed their initiatives to regulate cannabis as a tool to protect human rights and fight organized crime. Given the need to monitor and evaluate legal regulation and negative and positive effects on health, human rights, development and security of any drug policy, Ms. Fordham called on all relevant United Nations agencies, including OHCHR, to participate in such evaluations. She ended by discussing the benefits of the responsible regulation of substances, such as tobacco, which enabled governments to increase taxes and reduce the levels of the use, while addressing tobacco-related harms without harsh judicial measures.

35. Mr. Lemahieu, in his closing remarks, encouraged all relevant parties to join the upcoming midterm review of the 2019 Ministerial Declaration and all the processes leading up to that review. He noted that the panel discussion had confirmed the need for a balanced approach with respect for the human rights of individuals and societies alike. Mr. Lemahieu concluded by reiterating the importance of science and reliable data while ensuring that decisions made on drug-related matters were grounded in evidence and were in line with agreed-upon legal commitments for which the United Nations was accountable.

36. Ms. Stegling welcomed the rich experiences shared by Member States during the panel discussion in terms of their progress made in relation to drug policy, including the provision of access to controlled medicines for medical purposes. She reiterated that the drug problem was complex and multifaceted and, as had been mentioned by many speakers, could not be discussed in a silo. She added that issues relating to the world drug problem were connected to all pillars of the United Nations. She also noted that a human rights mechanism on drugs would be useful in order to benefit from the experience of human rights experts. As an example of tackling a complex problem in a multifaceted way, Ms. Stegling referred to the joint programme targeting HIV, which

brought together 11 United Nations agencies, including UNODC, and brought issues for discussion to the Commission on Narcotic Drugs, the General Assembly, the Human Rights Council and the World Health Assembly. She concluded by encouraging a similar joint response to drug policy, in order to ensure a stronger and more effective programme and approach, where the discussions of the panel at the Human Rights Council could help inform the discussions at the Commission on Narcotic Drugs.
