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

Written statement* submitted by payamavaran hamyari (chatra), a non-governmental organization in special consultative status

The Secretary-General has received the following written statement which is circulated in accordance with Economic and Social Council resolution 1996/31.

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* Issued as received, in the language of submission only.



Effect of Unilateral Coercive Measures on Increase of Drug Use, Harm and Right to Health

Introduction

Unilateral coercive measures, often imposed by states or international entities as a means of exerting political pressure, have profound repercussions on the rights and health of affected populations. One of the significant consequences of these measures is the exacerbation of drug use and associated harms within communities already vulnerable due to socio-economic instability. As these measures restrict access to essential medicines and health services, they inadvertently create an environment where illicit drug use becomes a more appealing option for coping with anxiety, trauma, and despair.

The restrictions imposed by unilateral coercive measures often lead to severe shortages of healthcare resources, including access to addiction treatment, mental health support, and critical health services. This lack of support can result in a rise in drug dependency, as individuals turn to increasingly dangerous substances in the absence of safe and regulated alternatives. Consequently, the public health crisis intensifies, leading to increased rates of drug-related harm, including overdoses, the spread of infectious diseases, and mental health disorders.

Furthermore, the erosion of the right to health is starkly evident as populations bear the brunt of these coercive measures, manifesting in profound and detrimental ways. The right to health is a multifaceted concept that extends beyond mere access to medical services; it intrinsically encompasses several interrelated elements essential for maintaining and improving individual and community well-being. These elements include not only the availability and accessibility of healthcare facilities and medical treatments but also the underlying determinants of health, such as adequate nutrition, clean water, safe housing, sanitation, and education.

When unilateral coercive measures are enacted, they often disrupt economies and stifle development, leading to widespread poverty and deprivation. As local economies falter, so too do the systems that underpin health and well-being, making it increasingly difficult for individuals to obtain sufficient nutrition. Malnutrition can lead to a host of health complications, particularly among vulnerable populations such as children and the elderly, thereby exacerbating existing health disparities and increasing susceptibility to diseases. Moreover, access to clean water and sanitation is commonly compromised in the wake of economic distress, resulting in a rise in waterborne diseases and further burdening healthcare systems that may already be under strain.

In this climate of deteriorating health determinants, the right to health becomes severely compromised, with the social safety nets that typically cushion the most vulnerable communities being dismantled. This deterioration can catapult individuals into harmful cycles of drug use and addiction, as they seek relief from the psychological and physical suffering brought about by economic instability, social dislocation, and a lack of health resources. The normalization of substance use in response to these pressures can lead to a cascading effect, resulting in increased rates of drug dependency, mental health challenges, and the propagation of diseases related to drug use, such as HIV/AIDS and hepatitis.

Moreover, the societal implications of eroding health rights extend beyond individual suffering; they ripple through communities and nations, straining healthcare systems and public health initiatives. As populations grapple with rising health issues, the burden on healthcare providers' increases, often overwhelming an already fragile system. This situation can lead to a vicious cycle of health crises, limited healthcare access, and societal destabilization, perpetuating the very conditions that unilateral coercive measures originally sought to address or mitigate.

In essence, the intersection of unilateral coercive measures and the erosion of the right to health illustrates a complex and troubling dynamic, wherein political and economic pressures intersect with fundamental human rights.

Addressing these challenges requires not only a commitment to restoring and respecting the right to health as a universal principle but also a concerted effort to dismantle the structures that contribute to these violations. Through a comprehensive understanding and approach, policymakers can work toward ensuring that health rights are safeguarded and that the health of marginalized populations is prioritized, thereby breaking the cycle of harm that these measures so often perpetuate.

In addressing these challenges, it is crucial for the international community to recognize the detrimental effects of unilateral coercive measures on public health and human rights. Strategies should focus on promoting health, dignity, and well-being, ensuring that individuals have access to the treatment and services they need, rather than exacerbating existing vulnerabilities. Collaborative efforts that prioritize the right to health and support harm reduction initiatives are essential to combat the crisis of drug use and safeguard the well-being of marginalized populations.

Recommendations

- **Promote Dialogue and Diplomacy:** Encourage dialogue between affected states and the international community to discuss the unintended consequences of unilateral coercive measures on public health and social stability, fostering a collaborative approach to finding solutions.
- **Monitor the Implementation of Humanitarian Exceptions:** Advocate for the inclusion of humanitarian exemptions in unilateral coercive measures to ensure that essential medical supplies, addiction treatment services, and healthcare resources are made available to those in need, thereby protecting the right to health. Monitoring is crucial to guarantee that humanitarian exceptions are effectively translating into tangible access to essential health services, medications, and support for vulnerable populations. Without oversight, the intended benefits of these exceptions may not reach those who need them most. Effective monitoring can help identify and mitigate any potential human rights violations resulting from the imposition of unilateral coercive measures. By ensuring that humanitarian exceptions are honored, monitoring serves as a safeguard against practices that might deny individuals their right to health and well-being.
- **Enhance Transparency and Accountability:** Regular assessment and reporting on the implementation of humanitarian exceptions promote transparency and accountability among states and international actors. This transparency can foster trust among affected populations and ensure that commitments to humanitarian access are upheld.
- **Assess the Impact of Measures:** Monitoring can provide vital data on the impact of unilateral coercive measures and the effectiveness of humanitarian exceptions in alleviating harm. This information can guide future policy decisions and adjustments to existing measures to minimize adverse outcomes.
- **Enhance Access to Healthcare:** Support initiatives that expand access to comprehensive healthcare services, including substance use treatment and mental health support, particularly in regions impacted by unilateral coercive measures. This can be achieved through funding, capacity building, and partnerships with local health organizations.
- **Support Harm Reduction Strategies:** Promote harm reduction programs that provide safe spaces, clean syringes, and overdose prevention resources to minimize the risks associated with drug use. These programs should be integrated into broader public health efforts and supported by policymakers.
- **Facilitate Multi-Stakeholder Partnerships:** Foster collaboration between governments, civil society organizations, international agencies, and community-based organizations to develop comprehensive strategies that address drug use, health, and human rights as interconnected issues.
- **Encourage International Accountability:** Urge international bodies, such as the United Nations, to hold states accountable for the impact of unilateral coercive measures on health outcomes and human rights, promoting a more equitable global response.