



NGO Position Paper for the 2016 United Nations General Assembly Special Session (UNGASS) on Drugs

March 30, 2016

We are convinced by our work at the local level, that international drug policies should adopt an approach based on public health and human rights, given the deleterious and counter-productive effects that repressive policies have on global health. As such we would like the outcome of the UNGASS (United Nations General Assembly Special Session) on drugs, currently under negotiation, to put more emphasis on the following, based on the 5 Thematic Areas:

1. Drugs and Health

- A clearer commitment to reduce HIV infections and Hepatitis among people who use drugs (PWUD), as well as the package of interventions combining prevention, treatment and care for people who inject drugs, whose effectiveness has been proven, as stipulated by the UNAIDS, World Health Organisation (WHO) and United Nations Office on Drugs and Crime (UNODC)ⁱ. As a reminder, States committed themselves to the Political declaration of the High Level Meetingⁱⁱ on HIV/Aids in June 2011 to reduce 50% of new infections among PWUD. Globally, in 5 years, the decrease was only 10%. In Mauritius, more than one people out of 3 who got infected with HIV in 2015 were people who inject drugsⁱⁱⁱ. Moreover, the impact of overly repressive drug policies on the transmission of HIV^{iv} and Hepatitis C^v has been well documented. A good example of this is the fact that People who inject drugs cannot access clean syringes when arrested and incarcerated. 80% of people who inject drugs in Mauritius have been incarcerated^{vi}, and 20% of prison inmates are living with HIV.

2. Drugs and Crime

- A commitment that PWUD receive support and protection instead of sanctions currently in place, through the development and implementation of alternatives to prosecution, criminal sanctions and imprisonment for PWUD, in line with existing standards of proportionality as expressed in the Article 29 (2) of Universal Declaration of Human Rights, and specifically to proportionality for drug related offences as emphasized by the International Narcotics Control Board (INCB) 2007 Report (E/INCB/2007/1)^{vii}, the 2010 UNODC Note (E/CN.7/2010/CRP.6–E/CN.15/2010/CRP.1)^{viii}, and the UNODC 2012 Human Rights Guidance Notes^{ix}. In Mauritius, PWUD are arrested for possession of small amounts of drugs or paraphernalia, and report strong barriers to social re-insertion due to the Certificate of Character that hinders access to a workplace for life;

- A strong call for a formal revision of the metrics used to evaluate drug control policies, which currently consist of a small set of narrow indicators focused primarily on reducing the demand and supply of illegal drugs. Drug policy metrics should instead prioritize indicators that provide specific evidence on the health, peace and security, development, and human rights impacts of drugs and drug policies on communities^x.

3. Human Rights, Women Children and Communities

- A stronger commitment against the death penalty for crimes related to drugs, in line with Article 3 of the Universal Declaration of Human Rights, with the fact that the International Covenant on Civil and Political Rights has required that capital punishment be reserved solely 'for the most serious crimes', after which the Human Rights Council has taken a stand against the death penalty for drug

related offences (A/HRC/10/44)^{xi} arguing that they do not constitute the most serious crimes, with UNODC having made clear recommendations against the death penalty for drug-related offences (E/CN.7/2010/CRP.6–E/CN.15/2010/CRP.1)^{xii}. Also, the INCB has encouraged States to abolish the death penalty for drug related offences (UNIS/NAR/1199)^{xiii};

- A stronger commitment to address the issue of torture, through clear guidelines on how to treat people who are dependent on drugs and who are arrested and incarcerated, and a proper report mechanism. We welcome the inclusion of the “Nelson Mandela Rules” in relation to places of detention in the draft of the Outcome Document.

- A clearer commitment to low threshold user friendly services for PWUD, delivered in a timely fashion, in order to increase access to health and social services. We welcome the inputs of the draft document on the importance of having a gender specific and young people specific focus with regards to drugs. A clearer commitment on the transgender community would also increase access to services.

4. New challenges, threats and realities in addressing the world drug problem

- A clearer commitment that data collection and research that are pushed forward in the draft Outcome Document with regards to New Psychoactive Substances (*synthetic drugs*) will have a strong focus on health, instead of focusing solely on repression.

5. Drugs and Development

- A clearer commitment to integrate the question of poverty and its link with drug use. In Mauritius, we have a national Marshall plan on poverty. We recommend the Mauritian delegation to push for an analysis of the impact of current drug policies on poverty, and make recommendations to tackle the link between poverty and drug use. These recommendations should be integrated in the Outcome document, as well as in International and National plans on drugs, as well as poverty.

General Comments

- Generally speaking, the draft of the Outcome Document published on 25 February last, focuses on a prohibitionist perspective of drug use. This document reaffirms the vision of a drug free world, while various UN agencies have condemned this approach and its negative impact on public health, human rights, and economic and social development, including UNODC^{xiv}, UNAIDS^{xv}, the WHO^{xvi}, the United Nations Development Programme (UNDP) ^{xvii}, UN Women^{xviii} and the United Nations High Commissioner on Human Rights (A / HRC / 30/65) ^{xix}. These agencies have demonstrated, based on evidence, that repressive drug policies have a counter-productive effect, and called for the removal of criminal penalties for drug use.

We would recommend that the official delegation travelling to UNGASS include a representative from civil society, as was the case for the UNGASS on HIV in 2011, where the delegation comprised of the Vice President of Mauritius and a representative from civil society.

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- ⁱ UNAIDS, 2015. *A Public Health and Rights Approach to Drugs*. Available at http://www.unaids.org/sites/default/files/media_asset/JC2803_drugs_en.pdf
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- ⁱⁱⁱ Ministry of Health and Quality of Life, December 2015. *Statistics on HIV/AIDS*
- ^{iv} Global Commission on Drug Policy, 2012. *The War on Drugs and HIV/AIDS: How the Criminalisation of Drug Use Fuels the Global Pandemic*. Available at http://www.globalcommissionondrugs.org/wp-content/uploads/2012/03/GCDP_HIV-AIDS_2012_EN.pdf
- ^v Global Commission on Drug Policy, 2013. *The Negative Impact of the War on Drugs on Public Health: The Hidden Hepatitis C Epidemic*. Available at http://www.globalcommissionondrugs.org/wp-content/uploads/2016/03/GCDP_HepatitisC_2013_EN.pdf
- ^{vi} National Aids Secretariat (NAS), 2013. *Integrated Behavioural and Biological Study among people who inject drugs*.
- ^{vii} INCB, 2007. *Annual Report*. Available at http://www.incb.org/documents/Publications/AnnualReports/AR2007/AR_07_English.pdf
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- ^{ix} UNODC, 2012. *The Promotion and Protection of Human Rights*. Available at https://www.unodc.org/documents/justice-and-prison-reform/UNODC_Human_rights_position_paper_2012.pdf
- ^x International Center for Science in Drug Policy : *Open Letter: A Call for a Reprioritization of Metrics to Evaluate Illicit Drug Policy*(2016), Available at https://www.unodc.org/documents/ungass2016/Contributions/Civil/ICS DP/ICS DP_Open_Letter_EN_Web.pdf
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