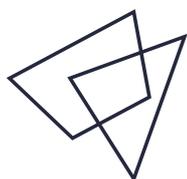


**Influencing rights-based
drug policy reform:
The International Guidelines
on Human Rights and Drug
Policy in action**



**INTERNATIONAL GUIDELINES ON
Human Rights + Drug Policy**

About the International Centre on Human Rights and Drug Policy

Established in 2009, the International Centre on Human Rights and Drug Policy (HRDP) is an academic programme dedicated to developing and promoting innovative and high-quality human rights research and education on issues related to drug laws, policy, and enforcement. HRDP is based at the Human Rights Centre, University of Essex.

About the International Guidelines on Human Rights and Drug Policy

The International Guidelines on Human Rights and Drug Policy are the result of a partnership between HRDP and the United Nations Development Programme (UNDP), and a three-year international consultative process, to apply contemporary human rights legal standards to drug policy. Covering the entire supply chain, from supply to use, and grounded in basic human rights principles, the Guidelines address the catalogue of core internationally recognised rights, as well as drug policy themes (health, development, and criminal justice) and groups (children, women, indigenous people). The Guidelines highlight the measures that States should undertake or refrain from undertaking in order to comply with their human rights obligations, while taking into account their concurrent obligations under the international drug control conventions. They are intended as a normative reference for parliamentarians, diplomats, judges, policy makers, civil society organisations, and affected communities.

About the Implementation Report Series

Standard setting is a first step towards rights-based action. However, it is not always clear how certain standards – often broadly phrased – translate into concrete measures on the ground. Measuring human rights progress is a further challenge. The Implementation Report Series addresses these challenges. Written for a general audience, the reports are intended to highlight key themes or issues in drug policy requiring human rights attention, best practices from the local level that demonstrate rights realisation, and tools and methods for translating norms into action. The reports take a positive perspective, focusing on existing efforts and opportunities from around the world showing how action on human rights is possible and practical in the drug policy space and how – in some cases – it is already happening. It is our hope that this series showcases the possibilities for transformative rights-based action in drug policy in a way that is beneficial to those working in drug policy who may not have human rights expertise, as well as those working in human rights who may be unfamiliar with drug policy issues.

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INTRODUCTION

There is a strong international consensus that drug policies must be carried out in full conformity with human rights. However, for a long time there remained a lack of clarity as to what human rights standards require of States in the context of drug control law, policy, and practice. The International Guidelines on Human Rights and Drug Policy are the result of a three-year, global participatory process to address this gap.

Since their launch in 2019, the Guidelines have become an important tool for stakeholders to advocate for, develop, and implement human rights-based drug policies at the national, regional, and international level. Human rights lawyers have used the Guidelines to train criminal court judges in Albania and law enforcement officials in Nigeria. Networks of people who use drugs have used the Guidelines to teach their peers how to advocate for law and policy reform and ensure government accountability. Civil society advocates and parliamentarians from around the world have used the Guidelines to challenge laws and law enforcement practices that violate protections against arbitrary detention, torture, and ill-treatment and to advocate for law and policy reform to ensure the rights to an adequate standard of living and to harm reduction and other health services for people who use drugs. United Nations (UN) drug control, health, human rights, and development entities have cited the Guidelines in policy guidance – for example, on alternatives to imprisonment in Myanmar and on social protection in custody hearings in Brazil.

This implementation report provides a snapshot of four years of Guidelines implementation efforts by stakeholders across more than 25 countries in the Americas, Asia, Europe, and Sub-Saharan Africa; by the European Union; and by UN human rights mechanisms, reflecting an emerging community of practice among a diverse group of stakeholders. During this period, we have been documenting and analysing the range of practices in order to catalogue this evolving community of practice with the goal of inspiring and expanding the community further.

Our findings are based on discussions with key stakeholders who have used the Guidelines in their work, as well as a desk review of materials related to the Guidelines' implementation, including presentations and papers for regional and national dialogues on the Guidelines, advocacy materials (such as legal and policy briefs), training and educational materials, materials produced by UN human rights mechanisms, and guidance documents published by civil society, national governments, and regional and international organisations. Stakeholders consulted throughout this process were diverse with respect to geography, type of organisation, and focus of their work. We conducted a human rights analysis of these stakeholders' implementation activities, identifying three core rights-based elements for inclusion in the study: non-discrimination, participation and inclusion, and accountability.

This compilation demonstrates the ways in which the Guidelines are being used to advocate for, develop, and implement human rights-based drug laws, policies, and practices at the global, regional, and national level. It is intended as an entry point into how rights-based implementation work in drug policy can be successfully undertaken using the Guidelines. It aims to help inspire and catalyse further implementation processes for stakeholders seeking to ensure human rights-based compliance in drug control policy in their respective legal, policy, or practice environments.

GLOBAL-LEVEL IMPLEMENTATION: THE UNITED NATIONS HUMAN RIGHTS MACHINERY

While the Guidelines set a normative baseline for human rights compliance in drug policy, it is important that these standards become mainstreamed in the findings of formal mechanisms for human rights monitoring at the global level. To this end, the Office of the High Commissioner on Human Rights (OHCHR), civil society, academic institutions, UN treaty body members, and UN Special Procedures¹ have worked in various partnerships and within their respective institutions to educate UN human rights mechanisms about the Guidelines and to advocate for their inclusion in their respective areas of work.

For example, in recent years, civil society organisations have cited the Guidelines in reports and other communications submitted to UN human rights mechanisms relating to various issues and countries. These include submissions concerning Bangladesh,² Georgia,³ Italy,⁴ Kazakhstan, Mexico,⁵ Nepal,⁶ Philippines,⁷ South Africa,⁸ Switzerland,⁹ Ukraine¹⁰, and the United Kingdom,¹¹ and submissions to thematic Special Procedures monitoring rights related to extreme poverty,¹² housing,¹³ and arbitrary detention.¹⁴

In addition, UN treaty body members and Special Procedures have participated in regional consultations on the development and implementation of the Guidelines. Likewise, OHCHR and the International Centre on Human Rights and Drug Policy (HRDP) have organised regular briefings of UN treaty bodies, including the Human Rights Committee, the Committee on Economic, Social and Cultural Rights, and the Committee against Torture.

These efforts have been reflected in the work of several of these mechanisms. For example:

- The Committee against Torture has recommended that the Guidelines be taken into account in work on prison and criminal reform and on the design and implementation of a human rights-based strategy with respect to crop substitution.¹⁵
- The Working Group on Arbitrary Detention has likewise called for States to take the Guidelines into account in developing human rights-based drug policy, including with respect to the prohibition of arbitrary detention.¹⁶
- The Committee on Economic, Social and Cultural Rights, in calling for the decriminalisation of drug use and the availability of harm reduction services, has also referred to the Guidelines for direction.¹⁷
- The Working Group on the Issue of Discrimination against Women in Law and in Practice has called for States to take steps to integrate the Guidelines into human rights-based drug policies relevant to women as part of its efforts to address the root causes of women's deprivation of liberty.¹⁸
- The Special Rapporteur on the right to health has called for the closure of compulsory drug detention centres.¹⁹

Lastly, in April 2023, the Human Rights Council adopted the resolution 'Contribution of the Human Rights Council with regard to the Human Rights Implications of Drug Policy'.²⁰ Civil society organisations worked closely with the Member State co-sponsors to ensure that a reference to the Guidelines was included in the resolution. This is an important milestone in securing increasing diplomatic recognition of the Guidelines, providing 'agreed language' that can be replicated and developed at the Council and other UN forums.

REGIONAL-LEVEL IMPLEMENTATION

REGIONAL DIALOGUES

Between 2020 and 2022, four regional dialogues were convened, engaging more than 200 people across five continents, with the aim of stimulating discussion and mapping out challenges and opportunities for implementing the Guidelines.²¹ These dialogues were structured to promote inclusion and participation of the diverse stakeholders who had engaged in the development of the Guidelines and who might be key to their implementation in law and practice: people who use drugs; farmers who cultivate illicit drug crops; indigenous peoples who cultivate and use illicit drug crops for traditional purposes; civil society actors; UN and regional health, human rights, development, and drug control entities; independent drug policy and human rights experts; representatives of government health, foreign affairs, justice, and drug control agencies; law enforcement officials; judges; and parliamentarians.

Creating safe spaces for dialogue helps civil society, governments, and people involved with drugs explore possibilities for partnership and collaboration. The United Nations Development Programme's (UNDP) ability to work across many sectors of government and civil society, and its power to convene a wide range of stakeholders who might not normally communicate amongst one another, helped open up safe spaces to share ideas about projects to take forward and to create and strengthen alliances and opportunities for collaboration. Civil society partners in each region were essential for identifying participants and building trust.

During the Latin America and Caribbean regional dialogue, members of the Latin American Network of People Who Use Drugs reflected on how the environment offered them a space to engage with government officials and other UN experts as an equal, developing and considering ideas for the community to take forward. The Latin American and Caribbean Network of People Who Use Drugs subsequently developed a legal evaluation tool that uses the Guidelines as a framework to analyse how laws, policies, and institutions affect people who use drugs and to guide advocacy for law reform.

Opening up spaces for dialogue with a diverse community of stakeholders can provide courageous civil servants with the space to think about how to advance important policy initiatives and test ideas that are explicitly grounded in human rights. With this diverse community comes unique opportunities for partnership and application of these standards in national policy development.

EUROPEAN UNION REGIONAL DRUG STRATEGY

The inclusion of the Guidelines in overarching strategy documents is important for mainstreaming at the regional level and provides civil servants with a mandate to take human rights action in drug policy. One example is the European Union's Drugs Strategy 2021–2025, which cites the Guidelines in its strategic priority on international cooperation.²² The strategy sets out the shared goals and commitments of European Union Member States against which later progress will be measured. It has both diplomatic influence in terms of joint European Union positions in international forums and national influence in terms of government action to pursue shared objectives.

COUNCIL OF EUROPE SELF-ASSESSMENT TOOL

Assisting governments in tracking their progress on human rights in drug policy is an important role of regional and international mechanisms. The Pompidou Group of the Council of Europe has taken the lead by using the Guidelines, alongside Council of Europe human rights agreements, as the normative baseline for a self-assessment tool for countries in the region. The tool is available both in paper form and as an app. It is voluntary, non-comparative, and designed to facilitate exploration of human rights issues in drug policy and to encourage inter-ministerial discussions rather than naming and shaming.²³

NATIONAL-LEVEL IMPLEMENTATION

NATIONAL DIALOGUES

Regional implementation efforts have catalysed work at the national level. For example, following the South and Southeast Asia regional dialogue, the Commission on Human Rights of the **Philippines** held a national consultation in partnership with OHCHR and other UN entities. The consultation brought together government stakeholders designing and implementing policies on illicit drugs in the country (including drug enforcement officials, judges, prosecutors, and defence attorneys) and those advocating for a human rights-based approach to drug policy to assess the value of the Guidelines in supporting drug policy efforts in the Philippines. Initiating a conversation on these issues in an extremely punitive legal environment was a courageous move, particularly for individuals and civil society organisations working to challenge harsh drug policies.

The Guidelines and the UN Joint Programme on Human Rights in the Philippines

The UN Joint Programme on Human Rights in the Philippines, comprised of UN, government, and civil society partners, and tasked with providing technical assistance and capacity building for a human rights-based approach to drug control, was launched subsequent to the national dialogue. The Guidelines are an important reference that informs the programme's work to promote human rights-based approaches to drug control, and in particular, their work to transition compulsory drug 'rehabilitation' centres to voluntary, community-based systems.

As another example, the Sub-Saharan African dialogue was followed up with a national dialogue organised by the Ministry of Foreign Affairs, the Ministry of the Interior, and the Narcotics Control Commission of **Ghana**, in partnership with the Joint United Nations Programme on HIV/AIDS (UNAIDS), OHCHR, HRDP, and the International Drug Policy Consortium. The dialogue focused how the Guidelines could be used to support implementation of the 2020 Narcotics Control Commission Act, which provides for harm reduction and health care in place of criminalisation and incarceration for people who

possess drugs for personal use; alternative livelihoods for those who cultivate narcotic plants; and cannabis cultivation for industrial or medicinal purposes.²⁴ Participants from all sectors highlighted the need for judges, law enforcement officials, health professionals, and community members to be trained on how to apply the Guidelines to their work and the need to ensure that regional bodies, such as the African Union and Economic Community of West African States are educated about the Guidelines.

Following the dialogue, Ghanaian government entities and civil society actors have taken a number of follow-up actions. For example, the International Drug Policy Consortium and the POS Foundation are using the Guidelines in trainings for judges and for police officers and plan to use them in trainings they are developing with the assistant superintendent of police for senior police officers. The government of Ghana also published a report on the dialogue as a conference room paper that was distributed at the Commission on Narcotic Drugs' annual meeting in March 2023, thereby using the opportunity presented by an annual global forum to highlight how the Guidelines can be used as the basis for innovative discussions at the national level.²⁵

SENSITIZATION, TRAINING, AND CAPACITY BUILDING

Ensuring that the Guidelines reach stakeholders is critical. Affected individuals and communities need to know their rights so that they can take concrete actions to claim them. At the same time, duty bearers must have a clear understanding of their obligations to protect, respect, and fulfil the rights of affected individuals so that they can take appropriate actions to meet these obligations, and be held accountable if they fail to do so. Sensitizing duty bearers to understand the lived experiences of people who use or cultivate drugs, or who are otherwise affected by prohibitionist drug policies, is key to engaging duty bearers in work to ensure human rights-based drug laws, policies, and practices.

In **Albania**, the Ministry of Justice, in partnership with UNDP, OHCHR, the Global Drugs and Development Programme of GIZ, and HRDP, has developed a new training package for newly appointed criminal court judges, using the Guidelines to illustrate the ways in which human rights can support their role as members of the judiciary overseeing drug-related cases. The Guidelines have since been used as a reference in criminal cases – for example, to support alternatives to incarceration for cannabis cultivation and to dismiss a case for lack of fair trial standards. Judges and prosecutors who attended the training reported that it helped change their perspective on people charged with drug offences, noting the role that poverty plays in people's decision to cultivate drugs.

In **Nigeria**, the African Law Foundation and the West African Drug Policy Network have used the Guidelines as a resource for training criminal justice officers, conducting capacity-building activities for people who use drugs, and advocating for criminal justice reform.

In **Colombia**, OHCHR and the non-governmental organisation (NGO) Viso Mutop have used the Guidelines in workshops to train ombudspersons and municipal leaders to address conflicts arising from eradication efforts.

The Guidelines have also been used as a tool for professional and civil society trainings. For example, guidance for attorneys in the **United States** representing pregnant and parenting women who use drugs instructs that 'courts should not base custody determinations on past or current drug use', quoting the Guidelines to support this proposition.²⁶ Additionally, the International Network of People Who Use Drugs (INPUD) recently published a manual to assist people who use drugs in training their peers to effectively advocate for progress on global HIV/AIDS targets related to people who use drugs. This manual uses the Guidelines as a framework to teach about human rights, focusing in particular on the removal of punitive policies, community-led HIV responses, and government accountability for law and policy reform to meet these targets.²⁷ In 2022, INPUD conducted workshops using the

manual with drug user groups in **Indonesia, Nigeria, and South Africa**. As an outcome of these workshops, these groups have drafted five-year work plans that, amongst other things, identify arenas for human rights-based advocacy at the global and national level.

The Guidelines have also been used to prepare national government officials for participation in international events. For example, the background material prepared for the Mexican delegation to the VII Latin American Conference and XX National Conference on Drug Policy in Buenos Aires in August 2022 emphasised the Guidelines' utility as a reference tool for those working to ensure human rights-based drug policy at the local, national, and international levels.²⁸

National human rights institutions (NHRIs) and other national-level independent monitoring bodies play a critical role in advocating for and supporting rights-based drug law and policy reform and implementation at the national level and in facilitating coordination and cooperation amongst civil society, government, and the international community towards that end. NHRIs are usually established by the State but operate independently from the State to monitor and report on the country's human rights situation, investigate human rights violations, and support education and dialogue on the protection and promotion of human rights.²⁹

In **Mexico**, the NGO Documenta, with the support of OHCHR, held a training session to strengthen the capacity of Mexico's National Human Rights Commission and human rights monitoring bodies from across the country to understand and address arbitrary detention and other human rights abuses in compulsory drug detention centres. The training included a module on the Guidelines, providing participants with an opportunity to learn about the Guidelines and their application to drug laws, policies, and practices in Mexico. In **Scotland**, the Scottish Human Rights Commission organised an informal discussion with HRDP to learn about the Guidelines and discuss how they can be used to support its ongoing work. The impact of this training and capacity-building work is reflected in the work described below.

LAW AND POLICY DEVELOPMENT

Civil society organisations, parliamentarians, regional organisations, and UN entities are using the Guidelines to inform and support their work to promote law and policy reform at the national level.

In **Scotland**, the failure of previous approaches to prevent increasing drug-related deaths led to a declaration by the Scottish government of a public health emergency and the establishment of a national mission to prioritise a public health and human rights-based approach. The Guidelines were used in framing the initial evidence-gathering sessions to understand the changes needed to realise the rights of people with lived experience of substance use. They will also be used to help frame the development of a charter of rights for people affected by substance use, an implementation framework, and rights-based indicators for monitoring and evaluation.

In **Canada**, the HIV Legal Network and the Centre on Drug Policy Evaluation cited the Guidelines when appealing to Congress to pass legislation to decriminalise drug possession for personal use.³⁰ In their advocacy urging the government to refrain from reinitiating aerial aspersion of chemicals to eradicate illicit drug crops, **Colombian** NGOs have cited the Guidelines before environmental authorities and high courts to highlight the government's obligation to prohibit the aerial spraying of pesticides, herbicides, and other chemicals to eradicate illicit drug crops, unless the government has shown that such chemicals do not pose risks to health or the environment; to ensure that drug control measures do not cause environmental harm; and to guarantee that eradication efforts do not deprive people of the right to an adequate standard of living.³¹

In **Colombia**, personal drug use is constitutionally protected, and possession for personal use is decriminalised (though it is subject to administrative sanctions). But drug sales remain illegal; and inadequate information about drug quality, limited availability of harm reduction services, and deficient treatment for those who need it put fundamental rights to life, health, and free development of personality at risk. In its advocacy before the Constitutional Court, the Colombian NGO Dejusticia asked the Court to urge Congress to take action to address the human rights harms generated by this situation, taking the Guidelines into account.³²

Following a letter from a coalition of **Colombian** NGOs and academic organisations,³³ the UN Special Rapporteurs on health, toxic waste, indigenous peoples, the environment, food, and human rights defenders, together with the Working Group of Experts on People of African Descent, wrote to the Colombian government to raise concerns about aerial fumigation, citing the Guidelines, and requesting information regarding any measures taken to prevent harm.³⁴

In their proposed law to amend the Constitution to regulate drug use and possession for personal use and to ensure that the government's international human rights obligations prevail in formulating and implementing national drug policy, **Colombian** parliamentarians quoted from the Guidelines, arguing that they serve as the legal framework for national drug policy.³⁵ **Argentinian** parliamentarians likewise used the Guidelines to support their bill to reform Argentina's drug law within a human rights framework, proposing to decriminalise drug use and possession and cultivation for personal use, legalise medicinal, therapeutic, and palliative use of cannabis, and eliminate sanctions for the cultivation, production, trade, and supply of narcotic drugs for unlawful purposes where this conduct is carried out in the context of extreme vulnerability or gender-based violence.³⁶

High courts in **Colombia** have used the Guidelines to inform their decisions in three cases:

- In 2019, the Constitutional Court used the Guidelines to clarify State obligations to respect the rights of people who use drugs to consume drugs in public spaces. In making its decision, the Court referred to the Guidelines on State obligations to ensure evidence-based policymaking to guarantee the right to health of people who use drugs.³⁷
- In 2019, the Constitutional Court referred to the Guidelines on rights related to a healthy environment in its follow-up writ ordering strict conditions on the use of the herbicide glyphosate to eradicate drug crops. The Court's decision that fumigation could not resume until strict requirements had been met to protect the life, health, and environment of people who would be affected by fumigation reflected these Guidelines.³⁸
- In 2020, the Council of State cited the Guidelines in a case finding that the police can seize the minimum personal dose of drugs only in cases in which it is possible to verify that the drugs are going to be used for sale or distribution or because such possession affects the rights of third parties. The tribunal referred to the Guidelines to address concerns raised about drug and alcohol consumption by individuals under 18, noting, for example, that limits on consumption in educational institutions were in line with the Guidelines' position on differentiated treatment for children and other special populations.³⁹

MONITORING AND EVALUATION

National preventive mechanisms have used the Guidelines as a framework in the monitoring and evaluation of residential drug treatment centres, as part of their mandate to prevent torture and ill-treatment in places where people are or could be deprived of liberty. In **Uruguay**, for example, the National Preventive Mechanism commended the drug treatment centre that it visited for considering the voluntary, informed consent of pregnant women prior to and during treatment, highlighting the Guideline recommending that States should 'adopt immediate measures to end detention and punishment of women as a result of their drug use during pregnancy'.⁴⁰ **Mexico's** National Human Rights Commission has also used the Guidelines in its monitoring and evaluation of residential drug treatment centres as a framework to evaluate the centres' compliance with the rights to protection against torture and ill-treatment, to health, to an adequate standard of living, to privacy, and to be free from arbitrary detention, with differential attention to specific rights for particular groups.⁴¹

LEGAL ENVIRONMENT SCANS

A country's legal environment – its laws and policies, and their implementation and enforcement practices – can support or hinder the effectiveness of efforts to ensure human rights-based drug control policy. A legal environment scan or review is a process to help stakeholders understand how the existing legal framework protects rights or acts as a barrier to their fulfilment and, in turn, identify opportunities and strategies for legal reform.

INPUD's Legal Environment Scan: A Drug User-Led Monitoring Toolkit of Legal and Policy Framework provides guidance for community-led legal environment scans, using the Guidelines as a normative baseline to evaluate human rights compliance and assist with advocacy related to global HIV and AIDS commitments for people who use drugs.

Further, the Council of Europe's self-assessment tool, noted above, can be used as a framework to investigate and assess the human rights implications of Member States' national drug laws, policies, and practices. HRDP has published a similar tool focusing on alternatives to detention.⁴²

THE ROLE OF THE UNITED NATIONS IN NATIONAL IMPLEMENTATION

UN development, human rights, drug control, and health entities have been instrumental in efforts to implement the Guidelines, including through their power to convene diverse stakeholders, their capacity to encourage UN partners to take up the Guidelines in their relevant areas of expertise, and the relationships that they have with national government entities to support law and policy development and implementation.

In **Brazil**, UNDP, the UN Office of Drugs and Crime, and the National Council of Justice published the Manual on Social Protection in Custody Hearings, quoting the Guidelines to support recommendations to establish comprehensive social security programs guaranteeing equal rights for people who use drugs and people who have been imprisoned for drug-related offences.⁴³

In their policy paper *Alternatives to Imprisonment: Reducing Drug-Related Prison Overcrowding and Promoting Public Health Responses to Drug Use in Myanmar*, UNAIDS and the United Nations Office of Drugs and Crime cite the Guidelines to support the position that the decriminalisation of possession, purchase, and cultivation of drugs for personal use is compatible with the international legal framework.⁴⁴

Promoting the incorporation of the Guidelines in **Colombia's** drug policy is part of OHCHR Colombia's workplan. The Office also uses the Guidelines as part of the normative framework in its internal reports, including with respect to analysing territorial violence against coca growers, and in its annual reports.

UN entities often can engage directly with governments on human rights issues in countries where civil society space is restricted by law or practice. In this context, such entities have used the Guidelines to assess the compliance of draft and existing drug laws with human rights and to recommend how governments can ensure that human rights are protected in the implementation of drug control laws and policies.

KEY FINDINGS AND LESSONS FOR THE FUTURE

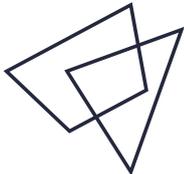
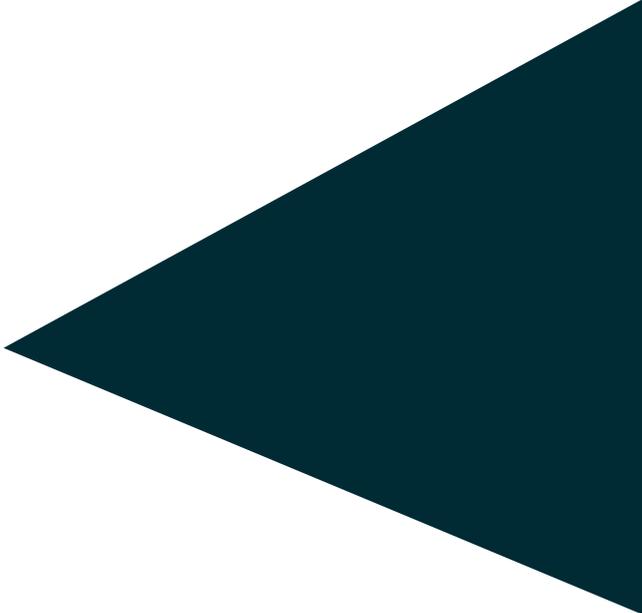
The above compilation is intended to illustrate the many ways that the Guidelines have been and may be used globally, regionally, and nationally for progress towards rights-based drug policy and practice, and in this way to inspire future efforts. Through this mapping, a number of lessons can be drawn for the future:

- **Awareness and dissemination** are crucial to ensure that the Guidelines reach and are accessible to all relevant stakeholders, including affected individuals and communities, duty bearers, and policy makers. Dissemination efforts have facilitated a wider awareness and understanding, but more work is needed to socialise and localise the Guidelines.
- **International support and engagement** of UN entities play a significant role in the implementation of the Guidelines by providing convening power and expertise and by leveraging these entities' relationships with national governments. UN engagement helps elevate the visibility and significance of the Guidelines and rights-based implementation efforts.
- **Creating space for inclusive dialogues** is where the power of the Guidelines is most visible. The nature of the Guidelines – co-sponsored by UN entities, created in a participatory manner, and filling a long-overdue gap – translates into a powerful convening tool to create space for dialogue amongst diverse stakeholders, allowing for more targeted idea-generation and collaboration around implementation.
- **Capacity building:** Sensitisation, training, and capacity-building efforts are crucial for stakeholders to understand and effectively apply the Guidelines. Participants in various countries have received participatory training on how to utilise the Guidelines in their work. This embeds human rights knowledge in the area of drug policy in a range of powerful institutions to further rights-based responses to drug control as well as to advocate for the necessary reforms.
- **Collaboration and partnerships** between different entities, including UN agencies, government bodies, civil society organisations, and regional organisations, have been instrumental in advancing the implementation of the Guidelines. Such collaboration helps mobilise resources, expertise, and networks to support advocacy, training, and law reform efforts.
- **Established normative basis enables space for creativity in action:** Having the normative framework of the Guidelines already in place frees stakeholders from the time-intensive effort of legal human rights research to enable creative, action-oriented work.
- **Legal status of Guidelines is strengthening:** Through the implementation work cited in this document – particularly in the ongoing use of the Guidelines as an interpretive instrument by both judicial and quasi-judicial bodies, as well as its recognition in a Human Rights Council resolution negotiated by States – the Guidelines' authoritative nature is strengthening.

ENDNOTES

1. Independent experts appointed by the Human Rights Council focusing on specific countries or human rights issues or groups, such as health, torture, arbitrary detention, indigenous peoples, and violence against women.
2. Harm Reduction International and World Coalition against the Death Penalty, *Submission to the Committee against Torture 67th Session – (22 July–9 August 2019) Bangladesh* (2019) (right to life, freedom from torture and ill-treatment).
3. UnMode and Harm Reduction International, Joint Submission to the United Nations Committee on the Elimination of Discrimination against Women (CEDAW) on the Sixth Periodic Report on Georgia (2023) (quoting commentary to the Guidelines on the use of withdrawal to coerce confessions or obtain information as torture or ill-treatment).
4. Forum Droghe, Lega Italiana Per la Lotta Contro L'AIDS, Società della Ragione, and ItaNPUd, *Submission to the Committee on Economic, Social and Cultural Rights – 66th Session (March 2020)* (2019) (harm reduction, right to health, right to participation).
5. Harm Reduction International, México Unido Contra la Delincuencia, and Equis, *Submission to the United Nations Human Rights Committee ahead of Mexico's Sixth Periodic Review 127 Session (14 Oct 2019–08 Nov 2019)* (2019) (harm reduction in prison, right to health, freedom from arbitrary arrest and detention).
6. Harm Reduction International, Recovering Nepal, Recovering Nepal Women, et al., *Submission to the United Nations Human Rights Committee ahead of the Third Periodic Review of Nepal (Adoption of List of Issues Prior to Reporting) 131st Session (1 – 26 March 2021)* (2021) (harm reduction, rights to health, privacy); Recovering Nepal, Recovering Nepal Women, Dristi Nepal, et al., *Universal Periodic Review – Third Cycle, 37th Session – January–February 2021: Joint Submission by a Coalition of NGOs on Human Rights and Drug Policies for UPR-Nepal* (decriminalisation of possession, purchase, or cultivation of controlled substances for personal use; rights to health and to privacy; freedom of thought, conscience, and religion).
7. Harm Reduction International, IDPC, INPUD, et al., *Submission to the United Nations Human Rights Committee ahead of the Fifth Periodic Review of the Philippines (Adoption of List of Issues)* (2020).
8. Harm Reduction International, *Submission to the Committee on Elimination of Discrimination against Women Pre-Sessional Working Group 77 (02 March–06 March 2020)* (2020) (harm reduction and the rights to health and to benefit from scientific progress).
9. Harm Reduction International and Geneva Platform on Human Rights, Health and Psychoactive Substances, *Submission to the Committee on Economic, Social and Cultural Rights – 66th Session (30 September–18 October)* (2019) (harm reduction, right to health, children).
10. Ukrainian Network of People who Use Drugs, Ukrainian CO "100% Life", Eurasian Harm Reduction Association, and Canadian HIV/AIDS Legal Network, *Submission to the Committee on Economic, Social and Cultural Rights – 67th Session (17 Feb 2020 – 06 Mar 2020)*, (decriminalisation of possession, purchase, or cultivation of controlled substances for personal use)
11. Release and Harm Reduction International, *Submission to the United Nations Human Rights Committee ahead of the Eighth Periodic Review of the United Kingdom of Northern Ireland and Great Britain* (2020) (violation of right to life in the context of international cooperation facilitating the imposition of the death penalty).
12. Harm Reduction International, Release, and Anti-Death Penalty Asia Network, *Submission to the UN Special Rapporteur on Extreme Poverty and Human Rights ahead of His 2019 Visit to Malaysia* (2019) (compulsory drug detention centres, arbitrary detention, right to health).
13. INPUD and Harm Reduction International, *Written Comments for the Special Rapporteur on the Right to Adequate Housing on the Draft Guidelines for the Implementation of the Right to Adequate Housing* (2019) (housing and the right to an adequate standard of living).
14. Canadian HIV/AIDS Legal Network, *Submission to the United Nations Working Group on Arbitrary Detention in relation to Its Study on Arbitrary Detention relating to Drug Policies* (2020); Alliance for Rights-Oriented Drug Policies, *The Problem of Arbitrary Detention in Norway and by Extension* (2020); International Drug Policy Consortium, *Submission to the United Nations Working Group on Arbitrary Detention on Arbitrary Detention in Drug Policies* (2020).
15. Committee against Torture, *Concluding Observations: Colombia*, UN Doc. CAT/C/COL/CO/6 (2023), paras. 19(d), 25(e).
16. Report of the Working Group on Arbitrary Detention, UN Doc. A/HRC/47/40 (2021), paras. 66, 123, 126(q).
17. Committee on Economic, Social and Cultural Rights, *Concluding Observations: Benin*, UN Doc. E/C.12/BEN/CO/3 (2020), para. 42.
18. Report of the Working Group on the Issue of Discrimination against Women in Law and in Practice, UN Doc. A/HRC/41/33 (2019), para. 84(f).
19. OHCHR, 'Statement by the UN Expert on the Right to Health on the Protection of People Who Use Drugs during the COVID-19 Pandemic', 16 April 2020, <https://www.ohchr.org/EN/NewsEvents/Pages/DisplayNews.aspx?NewsID=25797&LangID=E>.
20. See Human Rights Council, *Resolution 52/24: Contribution of the Human Rights Council with regard to the Human Rights Implications of Drug Policy*, UN Doc. A/HRC/RES/52/24 (2023), preamble ('Taking note of the International Guidelines on Human Rights and Drug Policy, and the exchange of information, lessons learnt and best practices on the promotion of human rights when addressing and countering all aspects of the world drug problem among States, relevant United Nations bodies, intergovernmental organizations and civil society in this regard') (emphasis added).
21. The dialogues were organised by HRDP and UNDP, in partnership with OHCHR, UNAIDS, the World Health Organization, and a range of national governments and civil society actors.

22. European Union, *EU Drugs Strategy 2021–2025* (2020).
23. Pompidou Group of the Council of Europe, 'Human Rights in Drug Policy: A Self-Assessment Tool', <https://pghumanrightsapp.com/>.
24. Ghana, Narcotics Control Commission Act (Act 1019) (2020); Ghana, Narcotics Control Commission (Amendment) Bill (2023)
25. *Conference Room Paper Submitted by Ghana, Titled 'National Dialogue on the International Guidelines on Human Rights and Drug Policy, Held in Accra, Ghana from 12 to 13 December 2022'*, UN Doc. E/CN.7/2023/CRP.II (2023).
26. R. Abrams and N. Rosenbloom, 'Effective Strategies for Courtroom Advocacy on Drug Use and Parenting', *Child Law Practice Today* (2019).
27. INPUD, *Our Rights, Every Body's Rights: Technical Assistance Module for Drug User-Led Advocacy* (2020).
28. A. Klip Moshinsky, M. Venegas Ramírez, G. Guerrero Valencia, et al., *Carpeta VII Conferencia Latinoamericana y XX Conferencia Nacional sobre Políticas de Drogas*, Centro de Estudios Internacionales Gilberto Bosques, Serie América, no. 44 (24 August 2022), <https://bit.ly/3KynqJb>.
29. See UN General Assembly, Resolution 48/134: *National Institutions for the Promotion and Protection of Human Rights; Annex; Principles relating to the Status of National Institutions*, UN Doc. A/RES/48/134 (1993). These institutions typically have a diverse membership, including representatives of civil rights NGOs, lawyers, academics, parliamentarians, and sometimes government representatives (participating in an advisory capacity). *Ibid.*
30. HIV Legal Network and Centre on Drug Policy Evaluation, *Submission to the House of Commons Standing Committee on Justice and Human Rights: Review of Bill C-5, an Act to Amend the Criminal Code and the Controlled Drugs and Substances Act* (2022).
31. Acciones Para el Cambio (a coalition comprising the NGOs Elementa, Dejusticia, Fescol, OCCDI Global, Corporación Viso Mutop, CPAT, Sisma Mujer, TNI, ATS, Corporación Humanas, Corporación Teméride, Temblores ONG, and Deliberar), *Derecho de Petición: Comentarios al Proyecto de Decreto 'por el cual se desarrolla el control de los riesgos para la salud y el medio ambiente en el marco de la erradicación de cultivos ilícitos mediante el método de aspersión aérea, y se dictan otras disposiciones'* (2020), <https://www.dejusticia.org/wp-content/uploads/archivos-linea-tiempo/2018-2021/29%20de%20enero%20de%202020%20APC.pdf>; Elementa, Corporación Viso Mutop, Acción Técnica Social, and Dejusticia, *Intervención audiencia pública 19 de diciembre de 2020* (2020), <https://www.dejusticia.org/wp-content/uploads/2020/12/intervencio%CC%8In-escrita-en-proceso-ambiental-PMA-PECIG-18122020-1.pdf>
32. Dejusticia, *Intervención del Centro de Estudios de Derecho, Justicia y Sociedad. Expediente D-14829* (2022), <https://www.dejusticia.org/wp-content/uploads/2022/10/intervencion-en-Demanda-contr-a-el-articulo-376-del-Codigo-Penal-rad.-D14829-12072022.pdf>.
33. ASOJUNTAS, Dejusticia, Comisión Colombiana de Juristas, et al., *Ref. Proceso de reanudación de la aspersión aérea con glifosato a los cultivos ilícitos en Colombia y riesgos para los derechos humanos* (2020), <https://www.dejusticia.org/wp-content/uploads/2021/03/Carta-Dejusticia.pdf>.
34. M. A. Orellana, D. Day, D. R. Boyd, et al., *Referencia: UA COL 13/2020* (2020), <https://www.dejusticia.org/wp-content/uploads/2021/03/Carta-relatores.pdf>.
35. G. Bolívar Moreno, I. Cepeda, A. Benedetti, et al., *Radicación de Proyecto de Acto Legislativo 'por medio del cual se reforma el artículo 49 de la Constitución Política'* (23 July 2019).
36. A. C. Gaillard, M. Macha, B. Osuna, et al., *El Senado y la Cámara de Diputados de la Nación: Modificación de la Ley 23.737* (2022).
37. *Sentencia C-253/19*, Corte Constitucional (Colombia), 6 June 2019.
38. *Auto 387/19*, Corte Constitucional (Colombia), 18 July 2019.
39. *Luvi Katherine Miranda Peña and Andrés Felipe Yepes Guzmán v. Presidente de la República, Ministerio del Interior, Ministerio de Defensa Nacional, Ministerio de Justicia y del Derecho and Ministerio de Salud y Protección Social, Consejo de Estado* (Colombia), 30 April 2020.
40. Institución Nacional de Derechos Humanos y Defensoría del Pueblo, *Monitoreo de centros de tratamiento del consumo problemático de drogas en modalidad residencial 24 horas Informe de centro 'El Jagüel'*, informe no. 133 MNP-SM/2022 (2022).
41. Mecanismo Nacional de Prevención de la Tortura, *Informe de supervisión ISP-01/2020 del Mecanismo Nacional de Prevención de la Tortura a establecimientos especializados en atención residencial a personas con trastornos debido al consumo de sustancias o a comportamientos adictivos, en el estado libre y soberano de Aguascalientes* (2020); Mecanismo Nacional de Prevención de la Tortura, *Informe de supervisión ISP-14/2020 del Mecanismo Nacional de Prevención de la Tortura (MNPT) sobre las medidas de prevención adoptadas por los establecimientos especializados en el tratamiento de adicciones en la República Mexicana, respecto a la emergencia sanitaria por la COVID-19* (2020).
42. International Centre on Human Rights and Drug Policy, *Alternatives to Detention: A Human Rights Assessment Tool; Implementing the International Guidelines on Human Rights and Drug Policy* (2023).
43. Conselho Nacional de Justiça, UNDP, and United Nations Office on Drugs and Crime, *Manual de proteção social na audiência de custódia: Parâmetros para o serviço de atendimento à pessoa custodiada* (2020).
44. UNAIDS and UNODC, Policy Paper: Alternatives to Imprisonment: Reducing Drug-Related Prison Overcrowding and Promoting Public Health Responses to Drug Use in Myanmar (September 2022)



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