

Subject: Open Letter to Reassure Human Rights are being adhered to in a fast-changing environment – Pleading for safety, health, well-being, and dignity

Dear Ghada Waly,

We commend your opening remarks at the CND Thematic Intersessional in September 2022 and acknowledge “the need to uphold the international drug control system, side-by-side with international human rights obligations” while prioritising people and their wellbeing. Together with our members, almost 400 civil society organisations, we urge the United Nations Office on Drugs and Crime (UNODC) to reinforce the essence of the Universal Declaration of Human Rights.

Generally, the extensive international debates on drug policies provide new insights and realities that different regions face regarding illicit substances, its use, effects, and impact on people and society. It is widely recognised that “human rights are rights inherent to all human beings, regardless of race, sex, nationality, ethnicity, language, religion, or any other status”¹ and that the Universal Declaration on Human Rights “is a milestone document in the history of Human Rights”.

Health is a fundamental human right. As emphasised by the WHO, “acknowledging health as a human right recognises a legal obligation on states to ensure access to timely, acceptable, and affordable health care”². Every person deserves the right to security, access to health services, and obtain medical care while it is being ensured that their dignity is being respected. It is also imperative that the responsibility and capacity of all human beings is fortified in developing and protecting the right to best-practice health care and is not enabled, equipped, or empowered to undermine good, physical, and psycho-social health. Thus, it is important to note that the human right to freedom is strengthened by focusing on strengthening prevention, ensuring access to treatment, and promote recovery. Hence, we call upon the Member States to uphold and promoting prevention, treatment, rehabilitation, and recovery services with a comprehensive, integrated, inclusive, evidence-based, and balanced approach.

In a “post-covid era” filled with ongoing and emerging conflicts and increased illicit trafficking across borders, the dynamic world is riddled with increased accessibility of illicit substances and consequently an increase in people who have problematic drug use and/or addiction. Suggested greater permission models and supply models continue to drive and not diminish demand. This, in turn, further entrenches normalisation and effecting youth’s perception of risk. Hence, the necessity to adhere to the fundamental right to [access to] preventive and restorative health is more important than ever. Even though not all persons who use drugs develop a substance use disorder, the percentage of people facing a substance use disorder is steadily increasing. Additionally, it is important to highlight, as shared by the World Drug Report 2022 (booklet 1, page 18), that “young people continue to use more drugs than adults and have higher levels of use than in past generations”. The latter is a concerning development that requires global attention and international cooperation to ensure that steps are taken to avoid further increase of substance use disorders among youth and within society as we strive to support children and youth to grow healthy and safe.

Following the Universal Declaration of Human Rights, the widely adopted Sustainable Development Goals and the Convention on the Rights of the Child acknowledge and further emphasise that “all human beings [should be able to] fulfil their potential in dignity and equality in a healthy environment”, with a particular focus on allowing children and youth to flourish into healthy adulthood. With the increase in drug use, especially among the younger generation, it is significantly

¹ <https://www.un.org/en/global-issues/human-rights>

² <https://www.who.int/news-room/fact-sheets/detail/human-rights-and-health>

important to adhere to the Human Rights of the young person. Especially children should be offered the necessary protection to live a healthy and substance-free life. The need for prevention, protection, and provision of health care is reiterated in the two-above mentioned conventions. The ratification of Article 33 in the Convention on the Rights of the Child highlights the need to protect children from the illicit use of narcotic drugs and prevent children from being used for the illicit production or trafficking of illicit substances. Besides this, Article 3.5 in the Sustainable Development Goals promotes the need to strengthen the prevention and treatment of substance use. Therefore, we urge the UNODC to continue to promote evidence-based prevention, access to treatment, and recovery, while encouraging monitoring and evaluation with disaggregated data by gender.

Ms Ghada Waly, as you shared in your earlier statement, access to treatment is not available to everyone in need, causing a treatment gap. Especially women and children face such treatment gaps. Various causes lead to limited access to treatment and need urgent attention, allow us to state a few below.

- Stigma and discrimination

Drug dependence is ranked among the five most stigmatised health conditions in the world. Stigma manifests on personal, societal, and community level and often affect people with substance use disorders and their families. Internalised stigma, being marginalised, discriminated against, and facing structural barriers pose barriers to accessing treatment and can accentuate negative feelings of shame and isolation. **Therefore, it is essential that stigma and discrimination are decreased among society, health care providers, media, communities, institutions, etc. through awareness raising and structural change while making recovery visible in the community.**

- Gender

According to UNODC data, only 1 out of 8 people who use drugs receive treatment worldwide. However, the percentage of women who use drugs accessing treatment is even lower, with some countries facing a lack of treatment options for women. Besides stigma and other barriers relating to normative ideas of gender withholding women to enter treatment, many treatment programmes are catered to meet the needs of men. Research has shown that women have specific needs and require gender-sensitive treatment. **Hence, treatment should include a gender-sensitive and trauma-informed approach while acknowledging barriers, stigma, and normative expectations based on gender.**

- Parenthood

Parents can face difficulties accessing treatment as residential centres often deny access to the residents' children while, simultaneously, the parental responsibilities make it difficult for the parent, particularly the mother, to regularly participate in outpatient programmes. Additionally, parents face additional barriers due to the perceived fear to lose custody of the child. Therefore, **family-centred and strengthening programmes are essential.** These programmes must provide tools for rehabilitation, such as vocational training, job opportunities, support in home seeking, and support family reunification, if possible, as this is an important factor in remaining motivated to sustain recovery.

- Justice/Crime

Those incarcerated often are denied access to treatment for their substance use disorder while being in an environment where drugs are more prevalent and overcrowding is an issue. Condemning discriminatory or violent practices in criminal justice, **it is important to allow and promote access to treatment and rehabilitation services.**

- Children

Children and adolescents with substance misuse face a higher urgency for treatment. As they are in their developmental stage, early intervention and treatment can prevent long-term negative effects. However, young persons facing substance use disorders are often unaware of the procedures to access treatment, face financial barriers and stigma, and do often not have availability to age-appropriate treatment. **Hence, social support systems should increase drug awareness, including preventive measures, while providing active support for appropriate treatment when a child faces a substance use disorder to ensure the full rights of the child.**

Beyond these bullet points, it is important to highlight that many sub-groups face discrimination and are denied their human right as they face difficulties to access the needed health services. The sub-groups include, but are not limited to, people living in street environments or are without a home, people with disabilities, the elderly, and members of the LGBTQIA++ community. **We urge more research on the impacts of denied treatment, rehabilitation, and reintegration services supporting the pathway of recovery for these sub-groups. Additionally, more sensitised programmes/policies need to be established to ensure their right to access a healthy life is adhered to.**

Overall, it is important to continue highlighting the need to increase access to treatment while promoting the pathway of recovery, including harm reduction as a continuum of care, alternatives to incarceration, and rehabilitation and reintegration services. **Health services offered need to be non-discriminatory, evidence-based, trauma-informed, gender- and culturally sensitive, and age-appropriate. There is not a 'one-size fits all' and treatment needs to be centred on the individual.** Recovery services should be integrated into society rather than being distanced from the community, this will allow for reintegration and reduction of judgements and stigma. **A person should not be denied their human right to access the necessary health services due to limited resources, discrimination, gender, etc. and the international community is obliged to establish programmes and policies that adhere to these rights.**

Signed by:

The World Federation Against Drugs