

STATEMENT BY  
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VICE CHAIR, HUMAN RIGHTS COMMITTEE<sup>1</sup>

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*Dear Chair, distinguished delegates and colleagues,*

I wish to thank the Commission of Narcotic Drugs for inviting me to speak at today's thematic discussion.

In [the thirtieth special session of the General Assembly on the world drug problem, held in 2016 \(UNGASS2016\)](#), all Member States of the United Nations reiterated their commitment to respecting, protecting and promoting all human rights, fundamental freedoms and the inherent dignity of all individuals and the rule of law in the development and implementation of drug policies. This was also reaffirmed in [the 2019 Ministerial Declaration](#) on the implementation of joint commitments to address and counter the world drug problem.

Critically, in the 2019 Ministerial Declaration, all member States acknowledged that responses not in conformity, *inter alia*, with applicable international human rights obligations pose a challenge to the implementation of joint commitments based on the principle of common and shared responsibility.

From our (Human Rights Committee's) perspective, this acknowledgement is important since efforts to respond to the drug problem may have a direct impact on the respect, protection, promotion and exercise of human rights.

*Dear Colleagues,*

In its deliberations, the Human Rights Committee has frequently addressed the human rights dimensions of measures taken to address drug problem reminding States of the need to adopt a rights-based approach in response.<sup>2</sup> The Committee has also called for "a focus on appropriate health care, psychological support services and rehabilitation for drug users, including drug dependence treatment such as opioid substitution therapy and harm reduction programmes."<sup>3</sup> The Committee has also stressed the value of adhering to the principle of proportionality in

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<sup>1</sup> [The Human Rights Committee](#) is the body of independent experts that monitors implementation of the International Covenant on Civil and Political Rights by its States parties.

<sup>2</sup> On the right to life see Human Rights Committee, Concluding Observations: CCPR/CO/84/THA (2005), CCPR/C/SDN/CO/3 (2007), CCPR/C/KWT/CO/3 (2016), CCPR/C/PAK/CO/1 (2017), CCPR/C/BHR/CO/1 (2018); personal security and liberty: CCPR/C/AZE/CO/4 (2016); CCPR/C/MUS/CO/5 (2017), CCPR/C/VNM/CO/3 (2019), CCPR/C/NLD/CO/5 (2019) Netherland; freedom from torture and other CIDT: CCPR/C/RUS/CO/7 (2015); the right to a fair trial: CCPR/C/SUR/CO/3 (2015); protection against forced labour: CCPR/C/BLR/CO/5 (2018).

<sup>3</sup> CCPR/C/GEO/CO/4.

## Check Against Delivery

national criminalisation and sentencing policies, which would ensure greater effectiveness of outcome while respecting at the same time considerations of equity and fairness.

I am pleased to observe the progress made in some countries. They have transitioned, or took initiatives for such transitions, from a punitive approach towards human rights and public health-based drug policy.<sup>4</sup>

In its General Comment 36, the Human Rights Committee has explained that the ‘right to life is a right which should not be interpreted narrowly’ and that governments ‘should take appropriate measures to address the general conditions in society that may give rise to direct threats to life or prevent individuals from enjoying their right to life with dignity’, including ‘substance abuse’ and ‘the prevalence of life-threatening diseases, such as AIDS’.<sup>5</sup>

According to the recent report of the Office of the High Commissioner for Human Rights, people who inject drugs have a 35 per cent higher risk of acquiring HIV than the general population. They are criminalized, marginalized and stigmatized in most countries - resulting in significant barriers to access to health services (including those for HIV) and in other human rights violations.<sup>6</sup>

Some progress made in addressing this challenge. One estimate indicates that more than 30 countries and 50 jurisdictions have adopted some form of decriminalization of drug possession for personal use.<sup>7</sup>

However, challenges persist.

Some 65 countries still criminalize possession of drugs.<sup>8</sup> A [recent Study](#) by the UN Working Group on Arbitrary Detention illustrates how criminalization contributes to arbitrary detention, prison overcrowding, and hinders access to treatment.

Undoubtedly, such punitive approaches undermine the primary goal of the international drug control efforts i.e. the protection of the health and welfare of humankind (as prescribed in the preamble of the 1961 drug convention).<sup>9</sup>

The use of the death penalty for drug related offences in over thirty countries remains a challenge in the exercise of the right to life. Under the international human rights law, States that have not yet abolished the death penalty, may only impose this punishment for “most serious crimes”.

The term “most serious crimes” must be read restrictively and appertain only to crimes of extreme gravity, involving intentional killing.<sup>10</sup> The drug related offences do not meet the threshold of “most serious crimes”. I urge States to abolish the death sentence for all crimes, including for drug-related offences.

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<sup>4</sup> For example, [Ghana](#), [Thailand](#); [Colombia](#); [Norway](#); [Philippines](#)

<sup>5</sup> [Human Rights Committee, General Comment No. 36: The Right to Life, CCPR/C/GC/36 \(2018\), para. 26.](#)

<sup>6</sup> [A/HRC/51/58, para 12](#)

<sup>7</sup> See [www.talkingdrugs.org/drug-decriminalisation](http://www.talkingdrugs.org/drug-decriminalisation); see also A/HRC/47/40, para. 121.

<sup>8</sup> UNAIDS, 2021 World AIDS Day report: Unequal, unprepared, under threat: why bold action against inequalities is needed to end AIDS, stop COVID-19 and prepare for future pandemics, Geneva, 2021. p. 51.

<sup>9</sup> [Single Convention on Narcotic Drugs, 1961, page 23](#)

<sup>10</sup> General comment No. 36, para.35.

*Dear Colleagues,*

Jurisprudence of the Human Rights Committee helped to shape various drug policy documents at national, regional and international levels, such as the [International Guidelines on Human Rights and Drug Policy](#). These guidelines provide a comprehensive set of international legal standards for placing human dignity and sustainable development at the center of State responses to the drug problem.

Dissemination and use of these Guidelines could be a useful tool for the implementation of the relevant recommendations of the Human Rights Committee.

Finally, we cannot forget that the rule of law is critical for successfully addressing all societal challenges, such as the drug problem. There are persistent challenges and gaps in securing access to justice for all which undermine the rule of law. Moreover, many public decision-making processes lack transparency and are non-participatory, hindering people's ability to demand and secure accountability.

Consequently, more must be done to ensure that the rule of law is respected and strengthened, especially in countries implementing measures to combat drug problem.

Protecting and promoting human rights, including gender equality and non-discrimination principles, is not an operational or strategic impediment. It is a requirement for successfully addressing drug related concerns and building public confidence in such efforts.

Thank you.