

DRUG USER PEACE INITIATIVE  
EXECUTIVE SUMMARY AND FOREWORD

drug war  
peace



## **Drug User Peace Initiative**

### **Executive Summary and Foreword**

The so-called 'war on drugs' has failed in its misguided attempt to eliminate (or even decrease) drug use. Further to this failure, the war on drugs, with its attendant prohibition of drugs and criminalisation of people who use drugs, has driven and exacerbated the risks, harms, and costs that are associated with drug use.

In reality, the war on drugs is a war on people who use drugs; it is a war on their health and a war on their human rights. The war on drugs has been a catastrophic failure. It is clear that it needs to end.

### **The Peace Initiative**

The International Network of People who Use Drugs' (INPUD) *Drug User Peace Initiative* highlights some of the most considerable and systemic harms that are done to people who use drugs in the name of the war on drugs. INPUD stresses that it is time for peace.

INPUD's *Drug User Peace Initiative* includes four key documents, each with a specific focus (though there is inevitably some limited crossover in terms of documents' content):

1. *Violations of the Human Rights of People who Use Drugs*

This document details the human rights violations to which people who use drugs are subject. People who use drugs can rarely rely on access to the service and healthcare provision which is their human right. People who use drugs cannot rely on not being arbitrarily detained, harassed, abused, arrested, or incarcerated. People who use drugs are subject to violations of their bodily integrity, to torture, to compulsory labour camps masquerading as 'treatment', and to execution. People who use drugs have their family lives interfered with and disrupted, lose custody of their children, and are vilified as being incapable of looking after themselves and their loved ones. Women, people of colour, and young people who use drugs (or are suspected of using drugs) experience even more human rights violations and state-sponsored intrusions into their lives.

2. *Stigmatising People who Use Drugs*

This document discusses the stigmatisation of people who use drugs, as well as the resultant discrimination, drug shaming, and drug-userphobia that they experience. The widely accepted addiction-as-disease model has resulted in people who use drugs being stigmatised and pathologised as sick people, people in need of 'treatment' (consensual or not). People who use drugs are infantilised as incapable, disempowered, manipulative, and unable to exercise agency or self-determination. The addiction-as-disease model is compounded by prohibition and criminalisation: people who use drugs are generalised as criminal, dangerous, violent, and unpredictable. Feeding directly from these stigmas, people who use drugs experience discrimination, social exclusion, rejection, drug shaming, defamation, violence, and difficulties with, and exclusion from, service and healthcare provision.

3. *A War on the Health of People who Use Drugs*

In this document, it is stressed that it is prohibition that drives many of the risks and costs that are associated with drug use: the war on drugs has therefore been responsible for causing huge damage to the health of people who use drugs. Prohibition results in people taking unregulated drugs, which can result in morbidity and overdose. Prohibition drives high rates of drug overdoses, and deaths from overdoses. Harm reduction interventions are few and far between, and a lack of needle and syringe programmes, access to opiate substitution therapies, and an almost total absence of drug consumption rooms has resulted in driving

ongoing incidence of hepatitis C and HIV amongst people who inject drugs. Prohibition and criminalisation, and resultant stigma, discrimination, and violence, act as deterrents for people to make contact with healthcare and service providers when they are in need of healthcare, harm reduction, and emergency medical attention. This further drives social exclusion and drug-related morbidity and mortality.

#### 4. *A War on Women who Use Drugs*

This document emphasises that the war on drugs is an asymmetric war, one that has come to disproportionately harm the health and wellbeing of women who use drugs. Women who use drugs experience considerable barriers to accessing healthcare and service provision, thus resulting in barriers to the prevention of blood-borne and sexually transmitted infections. Women who use drugs are more likely to experience violence, both perpetrated by the state, and in their homes and family contexts. Women who use drugs experience gross violations of their human rights, including arbitrary incarceration, forced sterilisation and abortion, losing child custody, interference with their bodily integrity, and interference with their families. Sex workers who use drugs are subject to compounded stigma, discrimination, social exclusion, and resultant harm to their health and wellbeing.

Collectively, the documents of INPUD's *Drug User Peace Initiative* make clear that the war on drugs must be fully dismantled: all of its facets need to end. Not only is **decriminalisation** of people who use drugs imperative, but **legal and regulated drug production** is essential in order to avoid the harms that result from black market drug production. Furthermore, service and healthcare provision and **comprehensive and holistic harm reduction** interventions need to be rolled out, and need to take into account people's variable and nuanced realities. In addition, stigmatisation of people who use drugs, and the resulting discrimination and social exclusion, urgently needs to be challenged.

As long as prohibition, criminalisation, and the war on drugs continue, people who use drugs – as well as their families and communities – will continue to suffer considerable harm. Quite simply, **the war on drugs is entirely incompatible with the promotion of human rights, health, safety, and wellbeing.**

### **Pushing for Change: UNGASS 2016 and beyond**

The United Nations General Assembly is the UN's principal representative, policymaking organ, with special sessions held in order to debate global issues, including drug control and policy. In 1998, the last UN General Assembly Special Session on Drugs (UNGASS) was held. Despite having been convened at the request of Mexico with the principal desire to debate and review the international drug control infrastructure, the Special Session unfortunately ended up being little more than a restating of the rhetoric of the war on drugs. The Declaration of the Special Session stressed that "[d]rugs destroy lives and communities, undermine sustainable human development and generate crime".<sup>1</sup> In short, it was a generalised assertion that 'drugs are bad'.

**As consistently stressed in INPUD's *Drug User Peace Initiative*, however, the harms and costs that are associated with drugs principally result from the war on drugs itself, a war that is supported by the so-called 'drug control organs' of the United Nations.** It is the war on drugs that drives and creates crime; the war on drugs that destroys lives and communities; the war on drugs that undermines harm reduction, healthcare, and service provision; the war on drugs that undermines human development; it is the war on drugs that undermines the wellbeing and health of people who use drugs and the communities in which they live.

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<sup>1</sup> Available at <http://www.un.org/ga/20special/poldecla.htm> (last accessed 14 November 2014)

In 2009, more than a decade on from the 1998 UNGASS, member states of the United Nations met in Vienna in order to review progress; the *Political Declaration and Plan of Action on International Cooperation towards an Integrated and Balanced Strategy to Counter the World Drug Problem* was published.<sup>2</sup> Prohibitionist rhetoric was restated. Indeed, the statement made by the United Nations Under-Secretary-General and Executive Director of the United Nations Office on Drugs and Crime misleadingly claims that “the drug regime has kept under control the otherwise enormous health threat posed by drugs”<sup>3</sup>. The converse is, in fact, the case: it is the drug control regime that has been responsible for driving said health threats.

Though the 1998 UNGASS was something of a facile and pointless affair, in 2012, presidents of Colombia, Guatemala, and Mexico called on the UN to host a conference on drug policy reform. As a result, **the next UN General Assembly Special Session on Drugs will take place in 2016**, substantially sooner than the 2019 date that had been scheduled. The 2016 UNGASS is one of the most significant opportunities that has arisen to shift drug laws, policies, and understandings in a progressive and pragmatic direction. Needless to say, opinions and stances are divergent and polarised, and this means that *direct* outcomes of this General Assembly are unlikely to be hugely substantive. However, it is probable that serious drug policy reform will be discussed and advocated (by some), with unprecedented focus on the harms of the war on drugs. This UNGASS should therefore be viewed as the beginning of a period of high-level debate and reform. **This UNGASS will not be like previous events: the topic of ending prohibition will be unavoidable.**

The documents that make up the *Drug User Peace Initiative* provide evidence-based arguments that can be used to inform advocacy by drug user activists and their organisations, as well as other drug law reform activists and key stakeholders, and are designed particularly to be used for such purposes leading up to this UNGASS session and beyond. They aim to be a major vehicle through which INPUD will engage in UNGASS, in that the documents provide material which describes and demonstrates the numerous human rights abuses and harms that are perpetuated in the name of the war on drugs and drug enforcement globally.

### **In Conclusion: ‘nothing about us without us’**

It is imperative to move towards drug policy and legislation that is evidence-based and that prioritises human rights, health, and wellbeing; it is imperative to reject punitive, moralising, and grossly detrimental and misguided criminalisation and prohibition.

**But the war on drugs needs to end on the terms of people who use drugs themselves, on the terms of those who have been so harmed by the pursuit of prohibition.**

INPUD stresses that too often, people who use drugs have been marginalised and sidelined in the formation of policy and legislation that pertains to them. It is time for people who use drugs to be respected as experts on their own lives and lived experiences. Drug policy and law reform needs to take place, but it needs to take place with the meaningful and respectful inclusion and leadership of people who use drugs themselves, of their organisations and networks.

People who use drugs are part of the solution. The war on drugs is the problem. **As INPUD and the international drug user rights movement have affirmed again and again: nothing about us without us.**

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<sup>2</sup> UNODC, 2009, *Political Declaration and Plan of Action on International Cooperation towards an Integrated and Balanced Strategy to Counter the World Drug Problem*, available at <http://www.unodc.org/documents/ungass2016/V0984963-English.pdf> (last accessed 19 November 2014)

<sup>3</sup> Ibid.:2

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## INPUD

**The International Network of People who Use Drugs (INPUD) is a global peer-based organisation that seeks to promote the health and defend the rights of people who use drugs. INPUD will expose and challenge stigma, discrimination, and the criminalisation of people who use drugs and its impact on our community's health and rights. INPUD will achieve this through processes of empowerment and international advocacy.**  
[www.inpud.net](http://www.inpud.net)

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These papers of the *Drug User Peace Initiative* are part of INPUD's work under Bridging the Gaps – Health and Rights for Key Populations. In this programme, almost 100 local and international organisations have united to reach 1 mission: achieving universal access to HIV/STI prevention, treatment, care and support for key populations, including sex workers, LGBT people and people who use drugs. Bridging the Gaps is funded through the Netherlands Ministry of Foreign Affairs. Go to [www.hivgaps.org](http://www.hivgaps.org) for more information.

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