

To: Committee against Torture (CAT)
Human Rights Treaties Division (HRTD)
Office of the United Nations High Commissioner for Human Rights (OHCHR)
Palais Wilson - 52, rue des Pâquis
CH-1201 Geneva (Switzerland)

Subject: Torture and other ill-treatment against people who use drugs in Russia

Dear Secretariat and Members of the Committee against Torture,

On behalf of the community of international civil society organizations working in the area of human rights and drug policy, we would like to draw your attention to the importance of the issue of torture and other ill-treatment of people who use drugs. This issue is currently under consideration by the Committee against Torture (the Committee), following the submission by NGOs of a “Joint Report on Russian Drug Policy” (posted on the Committee’s website).¹ In addition, the UN Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health has also recently made a submission to the Committee regarding the human rights impact of drug control laws.²

We are pleased to see that during the Committee’s consideration of the Russian Federation on November 9 and 12, 2012, Committee members asked the delegation questions related to Russia’s State Anti-Drug Policy and its consequences. Ms. Sveaass asked the delegation specifically about Russia’s drug policy, including the policy of “zero tolerance” that contributes to abusive treatment of people who use drugs by police and in private and state rehabilitation centers. In addition, Ms. Gaer pointed to the issue of discrimination of vulnerable populations, among which people who use drugs can undoubtedly be counted, and Mr. Bruni asked the delegation about HIV in prisons, which overwhelmingly directly affects people with addictions.

We would like to congratulate the Committee for raising these concerns with Russia. But we also urge you to ensure that the Committee develops meaningful recommendations to help the Government of the Russian Federation prevent torture and other ill-treatment of people who use drugs.

There are some particular reasons for us to worry about when it comes to the Concluding Observations of the Committee. In the Concluding Observations on Cambodia in 2010 the Committee made reference to the need to monitor drug detention centers for torture, but inexplicably ignored the existing data provided in the Shadow Report on torture of drug users. There was no call for investigations, accountability, redress, etc. Responding to credible reports of torture with calls for further monitoring is inadequate and does not insist on or foster the accountability that the Committee is there to ensure and to promote. When existing reports place credible documentation of torture in the public domain, then under the Convention on Torture

¹ Andrey Rylkov Foundation, Canadian HIV/AIDS Legal Network & Eurasian Harm Reduction Network, “Atmospheric Pressure: Russian Drug Policy as a Driver for Violations of the UN Convention against Torture” (2011), online at: http://www2.ohchr.org/english/bodies/cat/docs/ngos/JointPMMDPR_RussianFederation_CAT49.doc.

² A. Grover, UN Special Rapporteur on the right of everyone to the highest attainable standard of physical and mental health, “Submission to the Committee Against Torture regarding drug control laws,” 19 October 2012, online: <http://www.ohchr.org/Documents/Issues/Health/drugPolicyLaw.pdf>.

there is a legal requirement on States Parties to ensure impartial investigation and prosecution of those responsible. Simply put, a CAT recommendation that simply requests further monitoring indefensibly ignores the torture of people who use drugs. It is, therefore, not surprising that the practice of torture and other ill-treatment of this particularly vulnerable population continues in Cambodia.

As described in the above-mentioned Joint Report, the Russian Federation's deliberate policy is, to prohibit evidence-based treatment for drug dependence (i.e., in the form of opioid substitution therapy with methadone), impede harm reduction and other medical services on the one hand, and on the other hand, to promote zero tolerance and heavy-handed policing against people who use drugs, as well as high rates of incarceration in prison conditions that lead to a high rate of mortality from HIV, tuberculosis and other treatable illness. In essence, the Russian Federation singles out people with the health condition of drug dependence with a policy that intentionally imposes severe punishment while impeding medical treatment. The State Anti-Drug Policy consequently serves as a strong driver for torture and ill-treatment for at least 1.5 million people in Russia who are drug-dependent.

This represents an ongoing, consistent pattern of gross, mass violations of human rights. The deliberate decision by Russia to produce these entirely foreseen outcomes of severe pain and suffering, including death, among people who use drugs, requires some comment by the Committee. We therefore call on the Committee to address in its forthcoming Concluding Observations these factors which mean the Russian Federation's drug policy is in breach of its obligations under the Convention against Torture.

In particular, we urge the Committee to include within its Concluding Observations on Russia the comprehensive recommendations explicitly calling for the protection of people who use drugs from discrimination, torture and ill-treatment by regulating drug demand and harm reduction through evidence-based social and medical interventions, rather than through active stigmatization, harsh policing and intensive incarceration of people who use drugs. This approach is not only in line with the UN drug control conventions, but with the most recent Political Declaration to Counter the World Drug Problem adopted at the UN's High-Level Meeting in 2009³.

In order to enable meaningful follow up-on the national level, we also call on the Committee to recommend that the Russian Federation take immediate steps to prevent acts of torture and ill-treatment against people who use drugs by ensuring their wide access, including in the criminal justice and penitentiary systems, to evidence-based drug dependence treatment programs, including opioid substitution therapy with methadone and buprenorphine, as well as to other health care and harm reduction programs, in particular services for pregnant women, pain treatment services, and the full complement of interventions recommended in WHO, UNODC and UNAIDS *Technical Guide for Countries to Set Targets for Universal Access to HIV Prevention, Treatment and Care for Injecting Drug Users* (2009).

Finally, there is also an urgent need to address the risks of physical, mental and sexual violence and other abuses against people who use drugs while in police custody, pre-trial detention or prison; as well as the risks of cruel and inhuman punishment of people whose non-violent illicit behavior is strongly driven by the chronic health condition of drug dependence. For this reason we request the Committee to recommend the Russian Federation take legislative, policy,

³ Available online at: <http://www.unodc.org/documents/commissions/CND-Uploads/CND-52-RelatedFiles/V0984963-English.pdf>.

budgetary and other measures to prioritize voluntary referrals to evidence-based socio-medical interventions rather than criminal prosecution and/or punishment in cases where drug dependence is the underlying cause for non-violent offences (in particular non-medical use of drugs; possession and purchasing of drugs for personal use; and low scale drug trafficking) as stipulated in Articles 36(1b) and 38 of the UN *Single Convention on Narcotic Drugs, 1961* (as amended by the 1972 Protocol).

We thank the Committee, the Committee members and the Committee's Secretariat for the important work the Committee is doing in order to address the gravest violations of human rights.

Sincerely,

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