

Chair Report

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Forum: Human Rights Council

Issue: (201) The issue of human rights violations stemming from the war on drugs

Student Officer: Daniel Yang (DMHSCIP)

Introduction

The war on drugs, the global anti-narcotics campaign that prioritizes criminalization, prohibition, and law enforcement over treatment and public health, has been accused of evolving into “the war on human rights”, due to the mass incarceration, arbitrary detention, torture, racial discrimination, and extrajudicial killings that are the result of punitive measures carried out by participating member states in addressing drug use and trafficking.

Originating from the U.S. in 1971, the attempt to combat drug production, possession, and consumption has failed to impact the global demand for drugs significantly; in fact, the “war” has resulted in widespread human rights violations, especially in countries such as the U.S., Mexico, Colombia, Ecuador, the Philippines, and others. Suspected drug addicts are killed behind closed doors, subject to arbitrary detention, held in custody for long periods, coerced into confessions of guilt through beatings, and denied effective addiction treatment. In addition, the infiltration of drug cartels into narco states’ economies and the prevalence of corruption, along with money laundering, have exacerbated the issue, making it even more difficult to address the human rights violations at the root causes.

On the other hand, many countries have amended their policies to decriminalize the possession of small quantities of drugs for personal use and modified their strategy to an approach that emphasizes education, rehabilitation, and harm reduction. United Nations (UN) conventions and resolutions have also transitioned from legislations focused on imposing punitive sentences to recommendations for a more balanced approach, including alternative development, medical treatment, and the protection of

human rights, underscoring the importance of reducing drug addiction by empathizing with people who use drugs.

The current trend in the war on drugs amid the widespread occurrence of human rights violations is a glimmer of hope of a global will to progress in a direction with justice and stability as pillars for constructing resilient communities and solutions. However, the legal and theocratic positions of different member states necessitate the construction of multilateral agreements on drug sentencing, public health programs, and methodology aimed at diverting younger members of society from participating in drug-related activities. What are the potential solutions for preventing human rights violations stemming from the war on drugs, and how must member states adapt their policies to reflect this positive transformation?

Definition of Key Terms

Arbitrary detention

Arbitrary detention is the arrest and deprivation of a person's liberty without a legal basis or predictability. Examples include the Philippine government holding individuals in drug detention centers, located in proximity to or inside military bases, after torturing them so that they would admit to using drugs. Arbitrary detention constitutes a violation of Article 9 of the *Universal Declaration of Human Rights* and may lead to further human rights violations such as enforced disappearances and extrajudicial killings.

Criminalization

Criminalization is the process by which legal authorities designate certain actions as punishable crimes under the law. Drug criminalization involves prohibiting the possession, consumption, production, and distribution of certain substances. However, negative consequences such as overcrowded prisons, discouragement from seeking treatment, and disproportionate penalties give rise to counterarguments, including legalization and decriminalization in countries such as Portugal and Uruguay.

Drug cartels

Drug cartels are highly organized illicit consortia of independent organizations formed to control the production and distribution of drugs through the illegal drug trade and maintain drug prices at a high level to pursue profit. Key features include utilizing violence and intimidation to silence opposition, bribing police and politicians to gain impunity, and offering social services in poor communities to obtain support; the highly intricate connections between the drug cartels and the local economy, including the day-to-day survival of citizens, therefore increase the difficulty of immobilizing the war on drugs. Examples of drug cartels are the Sinaloa Cartel and Jalisco New Generation Cartel (CJNG) in Mexico, the Medellín Cartel in Colombia, and the Comando Vermelho (also known as the Red Command) in Brazil.

Extrajudicial killings

Extrajudicial killings are executions carried out by state actors or non-state actors without legal due process, such as a fair trial and legal justification. Article 6 of the *International Covenant on Civil and Political Rights* advocates for the protection of the right to life and the principle that no one should be arbitrarily deprived of their life. Regardless, examples of extrajudicial killings persistently occur, with the Philippine military killing more than 12,000 people in its war on drugs, and civilians executed by the Mexican security forces or killed by torture.

Harm reduction

Harm reduction is a set of policies and programs aimed at reducing the negative health, social, and legal consequences related to drug use. The intervention involves meeting people who use drugs “where they’re at” through prioritizing specific individual needs and focusing on the well-being of community life. Examples include opioid agonist therapy and needle exchange programs in the Netherlands, and education programs in England on complications associated with intravenous drug use, such as human immunodeficiency virus (HIV) and hepatitis infection.

Mass incarceration

Mass incarceration refers to the comparatively and historically high rates of imprisonment driven by economic and racial oppression and punitive criminal justice policies. In the U.S., this trend is facilitated by policies such as the mandatory minimums, the “Three Strikes and You’re Out” law (a life sentence was imposed regardless of any crime if the defendant had two prior convictions for serious or violent crimes), and the privatization of for-profit prisons. However, research has shown that drug imprisonment rates are not statistically significantly correlated with self-reported drug use, drug

overdose deaths, and drug arrests, and mass incarceration has implications such as employment discrimination, education deprivation, and separated families.

Narco states

Narco states are countries whose government, military, and economy have been effectively infiltrated by drug cartels or where elements of the government covertly run the illicit drug trade. The legitimate political authority may be absent, complicit, or powerless, resulting in high-level corruption and economic dependence on drug-related activity. The term has been used to describe countries such as Colombia, Mexico, Ecuador, and Guinea-Bissau at various times, due to the toleration or ignorance of drug transit and trafficking by government officials.

Transnational organized crime

Transnational organized crimes are illegal activities carried out by structured networks across borders and geographies to obtain, directly or indirectly, material or monetary benefits. Examples of transnational organized crimes are not limited only to drug trafficking but also include migrant smuggling, human trafficking, money laundering, and firearms trafficking. The *United Nations Convention against Transnational Organized Crime (A/RES/55/25)* and the Protocols thereto were adopted by the General Assembly in 2001 to tackle the weakened rule of law, increased violence, and economic instability resulting from organized crimes.

War on drugs

The term “war on drugs” was coined by former U.S. President Richard Nixon in 1971 to describe the national emergency due to the “public enemy number one” of drug abuse. The series of actions and policies involves combating drug trafficking and drug use through various ways, such as harsh sentences for drug possession, crop eradication, military action, international anti-drug agreements, and prevention campaigns. However, it has been criticized for its ineffectiveness and significant human rights violations, including mass incarceration, extrajudicial killings, and discrimination against minority groups, prompting numerous member states to pursue alternative approaches to the issue of unlawful drug use.

Background Information

The evolution of drug use

Drugs are natural or synthetic chemical substances other than nutrients that produce a physiological effect when administered to a living organism. Pharmaceutical drugs are often used to diagnose, prevent, mitigate, and cure disease symptoms by affecting how the body functions and leading to mood, behavior, and awareness changes. Since drugs, by definition, include substances such as caffeine, alcohol, and acetaminophen (also known as paracetamol), it is important to note that while the term “drugs” is commonly used to refer to illicit substances, not all drugs are illegal or addictive. However, certain drugs, such as narcotics and cannabis, may be abused and lead to addiction.

The usage of narcotics dates back to roughly 3400 B.C., with the Sumerians referring to the opium poppy as the “joy plant” and utilizing its euphoric effects for pain relief, sleep, and ritual purposes. Cannabis, another commonly discussed drug, has been used in medicine by ancient Chinese since 2800 B.C. for treating a vast array of health problems, such as inflammation, depression, and pain. On the other side of the world, coca leaves were used by indigenous peoples in Andean South America as a stimulant to increase oxygen intake during farming at high altitudes. Throughout history, drugs have played a significant role in colonial trade, including the Opium Wars and the mass addiction crisis in mid-19th-century China.

Drug refinement commenced in 1803 when the active ingredient morphine was isolated from opium and labeled as “God’s own medicine” due to its spontaneous, potent, and long-lasting effects. Heroin, or diacetylmorphine, was synthesized in 1874 as a drug without the common side effects of morphine, but was quickly shown to be wrong as the severe withdrawal symptoms led to heroin addiction increasing at alarming rates. Cocaine experienced a similar history, being isolated in the late 1850s and promoted by psychologist Sigmund Freud as a safe tonic for curing depression and sexual impotence. It rapidly gained acceptance after the euphoric and energizing effects of cocaine, used as the key ingredient of Coca-Cola, promoted Coca-Cola to the most popular soft drink in history, and even further when Thomas Edison promoted the “miraculous” effects of cocaine elixirs. However, it wasn’t until years later that people realized prolonged usage resulted in “dope fiend,” a term used to describe psychotic behaviors, such as sleep deprivation, loss of appetite, depression, and delusion, that accompany cocaine addiction.

Certain narcotics, also known as opioid pain relievers, are still used under a healthcare provider's direct supervision for severe pain that has not been alleviated using other painkillers. Nevertheless, narcotic pain medicines, such as fentanyl and morphine, have common withdrawal symptoms and can be abused, necessitating taking narcotics only as prescribed and gradually lowering the dosage at the end of the treatment period. The rise of prescriptive opioids has arguably led to a massive addiction crisis worldwide, especially after pharmaceutical companies, such as Purdue Pharma, aggressively labeled medicines containing narcotics, such as OxyContin (containing the narcotic oxycodone), as having a minimal risk of addiction, resulting in widespread overprescription.

The birth of the war on drugs

The criminalization of the use of narcotics stems from the *1909 Smoking Opium Exclusion Act* in the U.S., which prohibited the manufacturing and smoking of opium for recreation and heavily targeted Chinese immigrants. The *Hague Convention of 1912*, also known as the *International Opium Convention*, is considered to be one of the first efforts of the League of Nations to spread international opium control norms, including regulating the use and transport of raw, prepared, and medical opium. The U.S. responded with the *1914 Harrison Narcotics Act*, which, on face value, seems to be legislation providing for the legal registration of the use of opium and coca leaves, but has been argued to effectively serve as a prohibition law targeting the production and distribution of narcotic agents.

When Harry Anslinger, arguably known as the father of the war on drugs, took over the U.S. Federal Bureau of Prohibition (later changed to the Federal Bureau of Narcotics) in the 1930s, alcohol prohibition was coming to an end, leaving his department with nothing to do. As a result, Anslinger used the term “warfare against drugs,” creating hysteria over marihuana and promoting the *Marihuana Tax Act of 1937* to stigmatize and associate the illicit drug with Black and Mexican communities (the term marijuana derives from the Mexican Spanish word “mallihuan,” meaning “prisoner”). In 1970, under President Richard Nixon, the U.S. Congress passed the *Controlled Substances Act* to classify controlled substances such as heroin and marihuana in Schedule 1 (not accepted for medical use) and cocaine and morphine in Schedule 2 (abuse may lead to severe psychological or physical dependence). After the brief pause during Jimmy Carter's presidency, the war resumed in the 1980s, when the *Anti-Drug Abuse Acts* were passed under U.S. President Ronald Regan to establish mandatory minimum drug sentences that were disproportionately punitive toward minorities such as African Americans.

The UN has also adopted multiple conventions regulating the use of drugs following the establishment of the Commission on Narcotic Drugs by the Economic and Social Council Resolution 9(1)

in 1946, including the *Single Convention on Narcotic Drugs of 1961* (amended by the 1972 protocol), the *Convention on Psychotropic Substances of 1971*, and the *Convention Against Illicit Traffic in Narcotic Drugs and Psychotropic Substances of 1988*. These modern international drug controls banned non-medical use of psychoactive substances such as opioids, cannabis, and amphetamines while acknowledging the importance of the conservation of traditional medicinal plants for indigenous peoples. In recent years, however, there has been a trend to pursue alternative developments, promote harm reduction programs, and decriminalize drug use rather than imposing increasingly harsh sentences and deploying military troops to suppress drug cartels.

Key Issues

Extrajudicial killings

Suspected drug users or dealers are often injured or executed by gunshots behind closed doors, or on the streets immediately, either on sight or in staged encounters, without assailants identifying themselves or providing warrants. Even worse, authorities may falsely claim such actions as self-defense by planting guns, ammunition, and drug packets on the victims' corpses to implicate them in engaging in illicit drug activities. Innocent victims range from children to journalists, with many human rights advocates killed because the authorities asserted they were "obstructing justice." Human Rights Watch has strongly condemned the severe violation of human rights, with individuals deprived of their inherent right to life and procedural due process.

In the Philippines, former President Rodrigo Duterte carried out a war on drugs since taking office in 2016, with the anti-drug campaign named "Operation Double Barrel" resulting in an estimated 12,000 casualties in impoverished regions of Manila and other urban areas. The National Police and unidentified gunmen have killed children in the company of targeted adults and reporters who expose police culpability. Notably, the government at that time failed to arrest, let alone prosecute, a single police officer for their actions. Duterte has also been alleged, in parliamentary committee hearings, to have provided police officers monetary incentives per killing during crackdowns, with the amount depending on the target. The International Criminal Court currently has Duterte under custody, arrested for murder as a crime against humanity.



Figure 1: The dead body of a man who was killed in a shootout with police in the Philippines. Source: NurPhoto/Getty Images.

Mass incarceration

Worldwide, 20% of the prison population has been sentenced to drug-related offenses, and 61% of drug-related offenses involve drug possession, including small quantities of drugs. The criminalization of drug possession, even for minor, non-violent violations, has led to arbitrary detention, prison overcrowding, discrimination, and inhuman treatment in prison or police custody. Drug suspects are often held for long pretrial detention periods, forced to confess through torture, and denied legal representation and due process. The network of surveillance and social control is arguably rooted in and reproduces economic and racial inequality and oppression since police officers often target low-level users and minorities to meet enforcement goals and arrest quotas, as alleged by a Philippine national police officer during court hearings. In addition, those with more information obtain reduced sentences in exchange for valuable insights, while low-level drug users face mandatory full-term sentences. The loss of primary and secondary income generators for families results in financial hardship, social stigma, and emotional trauma, with children more likely to experience poverty, face academic struggles, and engage in deviant behaviors.

In the U.S. alone, more than one million arrests occur annually due to drug possession, with the majority of criminalized and incarcerated people being members of the Black or Latino communities, even though the two groups constitute less than one-third of the U.S. population, and do not exhibit higher rates of drug use compared to other ethnic groups. The establishment of mandatory minimums, where specific drug offenses have predetermined prison terms, has led to low-level offenders and minorities receiving disproportionately harsh sentences, with Black people 75% more likely to face a

mandatory minimum charge compared to White people who have committed the same offense. The former “Three Strikes and You’re Out” law in California imposed a life sentence for nearly any crime, regardless of the severity, if the offender had two convictions for serious or violent crimes. Today, more than half of inmates are serving sentences for non-violent offenses, with the “Three Strikes and You’re Out” law disproportionately targeting African Americans and people with mental and physical disabilities.

Public health

The war on drugs is in direct opposition to the public health approach, which advocates for allocating resources to health care and harm reduction rather than law enforcement and focusing on prevention, treatment, and support rather than punishments. Goal 3 of the Sustainable Development Goals emphasizes ensuring healthy lives and well-being for all, which includes strengthening the prevention and treatment of substance abuse while combating the epidemics of HIV and hepatitis. However, drug users often avoid seeking treatment for addiction and communicable diseases due to fear of arrest and social stigmatization, and some may even be marginalized and barred from accessing health services because of their addiction.

Furthermore, jails and prisons, where drug addicts are sent, rather than medical centers, rarely offer effective addiction treatment, leading to withdrawal symptoms and drug overdose after release. Criminalization gives rise to drug use in hidden and unsafe settings, such as abandoned buildings, preventing access to clean injection supplies and overdose reversal drugs, greatly increasing the extent of drug addiction. To exacerbate the issue, intravenous drug users are 24 times more likely to acquire HIV, along with other infections such as hepatitis B and C, due to the exchange of body fluids during needle and syringe sharing.

Economic activity

In narco states where the legitimate government is weak or absent, drug cartels create job opportunities for the residents through drug cultivation, processing, and transport, often offering higher wages than legal occupations due to the lack of alternatives. Providing social services, food, and security for communities creates a form of parallel governance, undermining the legitimate economy and empowering organized crime. Furthermore, in countries such as Ecuador, residents are required to pay taxes to the gangs through an extortion system known as the “vanuca,” stemming from the word “vaccine” and named for the dose of corruption it injects into citizens of the country. Refusal from

residents may be treated with kidnapping and murder, and governmental officials often disregard such events due to their engagement in corruption and bribery with the drug cartels; other governments attempt to counter the situation, resulting in full-on wars on drugs against the drug cartels.

Unregulated and illicit economic activity from the drug cartels necessitates governmental action due to the large sums of untaxed money flowing through bribery, money laundering, and the drug trade, leading to implications such as a distortion of exchange rates and inflation of property values. Additionally, cartel profits laundered through real estate and cash-heavy businesses, such as casinos, undermine fair economic competition and allow criminal networks to infiltrate the economy. The results of economic destabilization are decreased investment from transnational corporations, reduced tourism due to instability and violence, and increased expenditure on drug enforcement, all leading to diminished governmental income and the neglect of public services and fundamental human rights such as healthcare and education. The war on drugs has been an attempt to combat drug cartels and mitigate their economic implications, but several consequences have arisen due to the use of force, including destroyed infrastructure, increased poverty, and escalated social conflicts.

Major Parties Involved and Their Positions

United States of America

The U.S. has had a central role in the evolution of the war on drugs, starting with the declaration by former President Nixon in 1971 and the establishment of the Drug Enforcement Agency in 1973 to combat the national drug overdose and poisoning crisis driven by criminal drug networks. Not only has the U.S. adopted numerous acts criminalizing drug use, but it has also pressured other member states to adopt punitive drug legislation through the conduit of foreign aid and treaties. Notable examples include the Mérida Initiative in 2018, in which the U.S. cooperated with Mexico to combat transnational organized drug organizations, and Plan Colombia in 2000, in which the U.S. assisted in ending Colombian armed conflict due to drugs by increasing funding and training of the Colombian military.

Rooted in racial discrimination, the war on drugs in the U.S. has undoubtedly resulted in mass incarceration and racial disparities against African Americans and Hispanics in terms of sentencing for drug-related crimes. However, there has been a shift towards reform in the U.S., with 24 states legalizing cannabis use for recreation, and states such as Oregon attempting to decriminalize possession of small

amounts of drugs, including fentanyl and methamphetamine. The U.S. at the federal level still strongly condemns drug use, with previous legislation, such as the *Marihuana Tax Act* and *Controlled Substances Act*, enforced, and President Trump allegedly expressing support for the punitive actions taken by former Philippines President Duterte.

Mexico

In Mexico, drug trafficking organizations dominate the import and distribution of illicit drugs, including heroin, cocaine, and cannabis, in the U.S., with drug cartels such as the Sinaloa Cartel and Los Zetas operating with the efficiency and technology equal to most legitimate businesses. Ever since former President Felipe Calderón declared war on organized drug crimes in Mexico in 2006, the country has experienced a dramatic increase in violence, with more than 40,000 drug-related homicide cases recorded between 2006 and 2010. Human Rights Watch has obtained credible evidence of human rights violations, with members of the police and military systematically using torture to obtain forced confessions and being involved in extrajudicial killings and enforced disappearances around the country. Nonetheless, justice officials fail to investigate such human rights violations thoroughly, classifying potential cases of torture as “injury” and refusing to question the soldiers and police officers involved. Furthermore, conflicts between and within drug cartels to control the drug trade have resulted in serious crimes, including extortion of small businesses, mass kidnappings, and assassinations of governmental officials, affecting civilian life in every sphere. Former President Andrés Manuel López Obrador attempted to tackle the issue through the “hugs, not bullets” (*abrazos, no balazos*) strategy to focus on social programs and the root causes of crime by offering economic alternatives to young people; however, the plan has recently been abandoned due to it being shown to be ineffective, with continuously high rates of homicide and drug trafficking.

Colombia

Coca plants grow in rural, impoverished areas of Colombian jungles with little state presence, resulting in Colombia being the top producer of cocaine, supplying most of the U.S. and European markets. In the 1990s, guerrilla groups such as the Revolutionary Armed Forces of Colombia (Fuerzas Armadas Revolucionarias de Colombia, or FARC) resorted to the production, transportation, and distribution of illicit drugs such as cocaine and heroin as primary sources of income, financing operations through drug trafficking. The U.S., as part of Plan Colombia, has provided over 8 billion in aid since 2000 to fight drugs and insurgencies through ways such as eradicating coca crops and carrying out military

operations against guerrilla groups and drug cartels. However, with tens of thousands killed in drug-related conflicts, over 8 million internally displaced, and abuse by state forces, the war on drugs led by the U.S. has been criticized for prolonging the country's civil war. Notably, in 2016, a peace deal was signed between the Colombian government and the FARC, highlighting the need for a substantial transition in drug policy to regulate drug markets and the goal of constructing a stable and lasting peace. The incumbent President, Gustavo Petro, has criticized the 50-year war on drugs as a “failed policy” and emphasizes voluntary coca crop substitution, harm reduction, and greater development in rural regions.

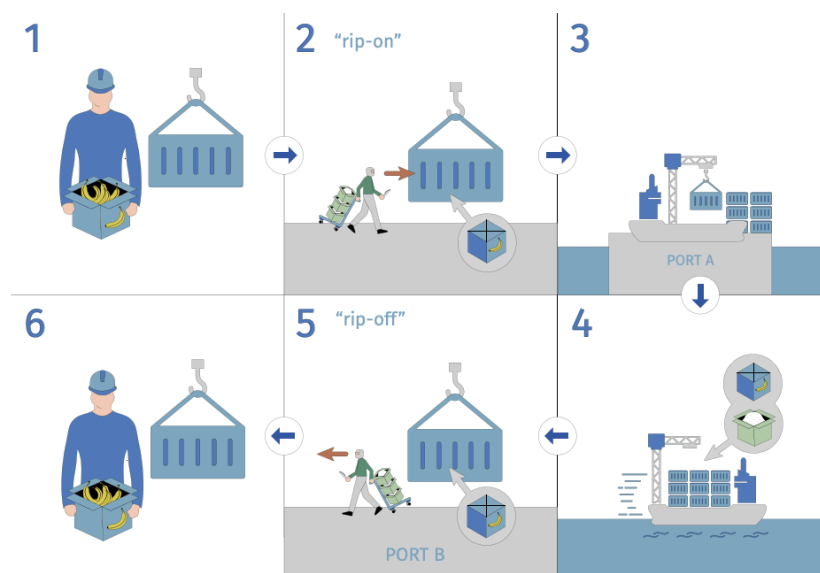


Figure 1: Container shipping of cocaine during drug trafficking. Source: United Nations Office on Drugs and Crime.

Portugal

Portugal, as the leader in reform, has decriminalized the acquisition, possession, and private use of small amounts of all psychotropic drugs since 2001, shifting toward a health-oriented approach and treating drug addiction as a medical issue. This policy shift was a recognition by the government that criminalization was not solving the massive heroin addiction and high rates of HIV infection among drug users. Possession, up to a 10-day supply, of drugs is considered an administrative offense, resulting only in penalties such as confiscation and referral to the Commission for the Dissuasion of Drug Addiction for non-mandatory counseling and specialized treatment services. Furthermore, harm reduction programs such as public education regarding drug addiction and the establishment of “shoot-up” centers for safe and clean drug taking were implemented alongside the legislation. Importantly, the trafficking of drugs is still considered a criminal offense. The results were significantly reduced drug-related deaths and levels

of drug use compared to other European Union countries, and decreased addiction rates and HIV infections resulting from drug use. Portugal continues to act as a model for decriminalization, displaying the efficacy of utilizing integrated support systems rather than punitive drug policies to combat drug use.

United Nations Office on Drugs and Crime (UNODC)

UNODC, established in 1997, is the leading UN agency responsible for tackling the world drug problem through various ways, such as fighting organized crime, preventing corruption, and promoting fair criminal justice systems. Historically, UNODC has assisted member states in developing national legislation based on the three UN conventions on drugs. However, in recent years, it has shifted toward a health-centered and human rights-based approach, acknowledging that punitive policies have failed to reduce drug demand and supply globally. The UNODC Strategy 2021–2025 integrates the protection of human rights into all its programs, which aims to bolster international cooperation when fighting against drugs, crime, corruption, and terrorism. UNODC also publishes World Drug Reports annually, analyzing trends in drug markets and implications of drug policies, to assist member states in addressing threats posed by drug markets and mitigating their impacts.

Human Rights Watch (HRW)

HRW is a non-governmental organization (NGO) that investigates and reports on human rights abuses worldwide and directs advocacy toward governments, pushing them to change their policies and practices. HRW criticizes, with supporting documentation, the detrimental human rights violations stemming from the war on drugs, including disproportionate torture and extrajudicial killings, neglect of rights to health and privacy, and corruption of authorities. Not only publishing reports regarding cases of human rights violations, HRW also urges governments to adopt alternative policies concerning the drug trade to reduce the enormous cost associated with the human rights violations of the current war on drugs. HRW also works alongside other NGOs, including the International Drug Policy Consortium, Harm Reduction International, and Amnesty International, to expose abuses and push for reforms.

Timeline of Events

Date	Description of event
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February 05–26, 1909	The International Opium Commission convened in Shanghai, marking the start of the international regulation, and eventually prohibition, of narcotics.
January 23, 1912	The <i>International Opium Convention</i> was signed as the first international drug control treaty at the end of the Hague Conference, regulating the production and distribution of opium, morphine, and cocaine.
June 17, 1971	U.S. President Richard Nixon declared a war on drugs, stating that drug abuse is “America’s public enemy number one,” marking the start of the war on drugs.
October 27, 1986	The U.S. adopted the <i>Anti-Drug Abuse Act</i> , increasing the number of drug-related offenses with mandatory minimum sentences. 100:1 sentencing disparity was applied to crack cocaine, associated with African Americans, compared to powder cocaine, associated with White Americans.
September 21, 2000	Plan Colombia was signed into law in the U.S. as an attempt to militarize anti-drug efforts in Colombia, eradicate coca cultivation, and combat guerrilla groups such as the FARC.
July 01, 2001	Law 30/2000 entered into force in Portugal, decriminalizing the personal use and possession of all illicit drugs, changing the offense from a criminal to an administrative one.
June 30, 2008	The Mérida Initiative, also known as Plan Mexico, was signed into law as a security cooperation agreement between the U.S. and Mexico to combat drug trafficking, transnational organized crime, and money laundering.
December 23, 2013	Uruguay became the first country to legalize recreational cannabis, with citizens and permanent residents legally able to acquire cannabis from pharmacies and cultivate cannabis at home for personal use.
June 30, 2016	Former Philippines’ President Rodrigo Duterte entered office, commencing a war on drugs marked by extrajudicial killings, forced disappearances, and democratic backsliding.

Relevant UN Resolutions, Treaties, and Events

- Single Convention on Narcotic Drugs, 30 March 1961

The international treaty, as amended by the 1972 protocol, aims to tackle drug abuse by limiting drug production, distribution, and possession to only medical and scientific purposes and combating drug trafficking through international cooperation. The convention created four Schedules for internationally controlled substances, with the strictest regulations imposed on substances most liable to abuse, including cocaine, opium, and cannabis.

- International Covenant on Civil and Political Rights (ICCPR), 16 December 1966

The ICCPR is a legally binding multilateral treaty, forming part of the International Bill of Human Rights with the *Universal Declaration of Human Rights* and the *International Covenant on Economic, Social, and Cultural Rights*. The ICCPR protects the right to life, due process of law, liberty, security, and other fundamental freedoms and rights that are violated due to extrajudicial killings, mass incarceration, and arbitrary detentions in the war on drugs.

- Convention on Psychotropic Substances, 21 February 1971

The convention established an international control system for psychoactive substances, expanding controls on several synthetic psychoactive drugs such as amphetamines and psychedelics, thus complementing the *Single Convention on Narcotic Drugs*.

- Convention Against Illicit Traffic in Narcotic Drugs and Psychotropic Substances, 20 December 1988

The treaty provides measures against drug trafficking, money laundering, and precursor chemicals, requiring member states to adopt punitive domestic legislation and intensify drug criminalization. This convention is the last of the three major UN drug control treaties currently in force, establishing additional legal mechanisms for enforcing the previous two conventions.

- Declaration on the Guiding Principles of Drug Demand Reduction, 8 September 1998 (A/RES/S-20/3)

The resolution, adopted during the UN General Assembly Special Session on Drugs with the slogan “A drug-free world – We can do it,” aims to prevent the use of drugs and reduce the adverse consequences of drug abuse. Key components include eradicating illicit crops, combating drug trafficking, and improving border control while recognizing the need for treatment and rehabilitation programs. However, it has faced widespread criticism for its harsh impact and failure to meet most goals by the 2008 deadline.

- United Nations Guiding Principles on Alternative Development, 11 February 2014 (A/RES/68/196)

The resolution provides a comprehensive framework for countries to develop sustainable, long-term alternatives for reducing the illicit cultivation of crops used for the manufacture of psychotropic substances by targeting root causes such as extreme poverty, food insecurity, and lack of basic infrastructure. The promoted alternative development programs are designed to mitigate negative environmental impacts, include local communities during implementation, and consider the protection of human rights.

- Addressing and countering the world drug problem through a comprehensive, integrated, and balanced approach, 18 December 2024 (A/RES/79/191)

The most recent resolution adopted by the General Assembly about the war on drugs reaffirms global commitments to address the worldwide drug issue while adhering to international drug control treaties and the 2030 Agenda for Sustainable Development (A/RES/70/1). Key themes involve utilizing a multidisciplinary approach that includes prevention, harm reduction, public health, law enforcement, and alternative development.

Evaluation of Previous Attempts to Resolve the Issue

Decriminalization and legalization

Decriminalization purely refers to the abolishment of criminal prosecutions for the possession of small amounts of drugs for personal consumption, with drug possession still illegal and resulting in administrative fines and treatment referrals. Examples include countries such as Portugal (the Portuguese Drug Policy Model) and the Czech Republic, along with independent administrative regions such as Oregon in the U.S. (between 2020 and 2024) and British Columbia in Canada. The main

argument is to reduce the social barriers and stigma that prevent severe drug addicts from seeking life-saving treatment and decrease their likelihood of overdose or consumption of lethal alternatives. However, the results of this transformation vary, with Portugal observing decreases in HIV infection cases, drug-related deaths, and overall social cost, and Oregon, conversely, finding slight increases in open drug use and overdose deaths. Therefore, a balance between policy changes and social services should be implemented simultaneously, with education regarding drug addiction and public health programs also considered in tandem.

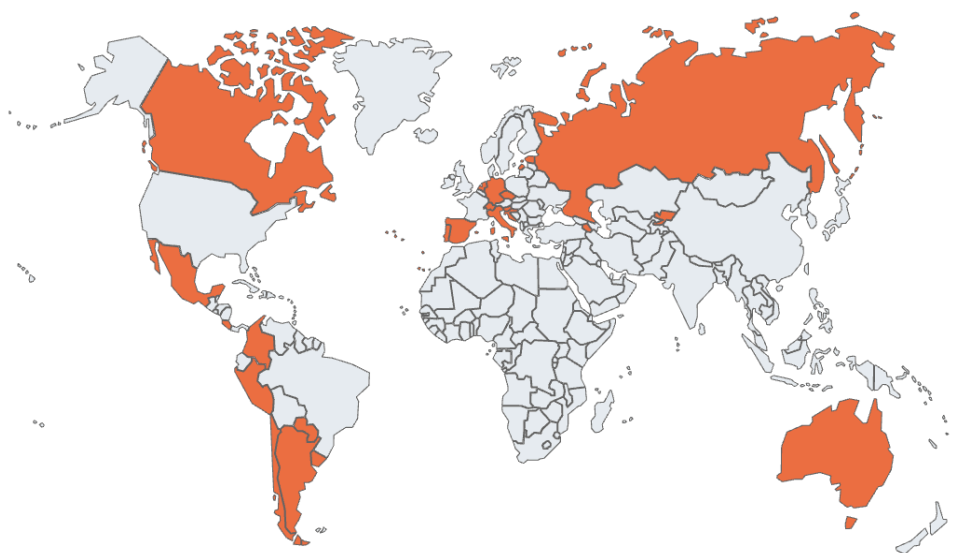


Figure 2: Countries that decriminalized drug possession at the state or national levels. Source: TalkingDrugs.org.

On the other hand, legalization involves removing all prohibitions against the licensed production, sales, and taxation of drugs, with psychotropic substances, such as cannabis, available for purchase commercially. Although no country has fully legalized drugs, examples of countries that have legalized cannabis include Thailand (between 2022 and 2025), Canada, Uruguay, and 24 states of the U.S., with benefits including decreases in drug trafficking and increases in annual gross domestic product due to taxation. However, although countries such as Canada have observed decreases in cannabis possession arrests and no significant increase in youth consumption, criticisms persist, highlighting the fact that the legal market is only a small proportion of national consumption.

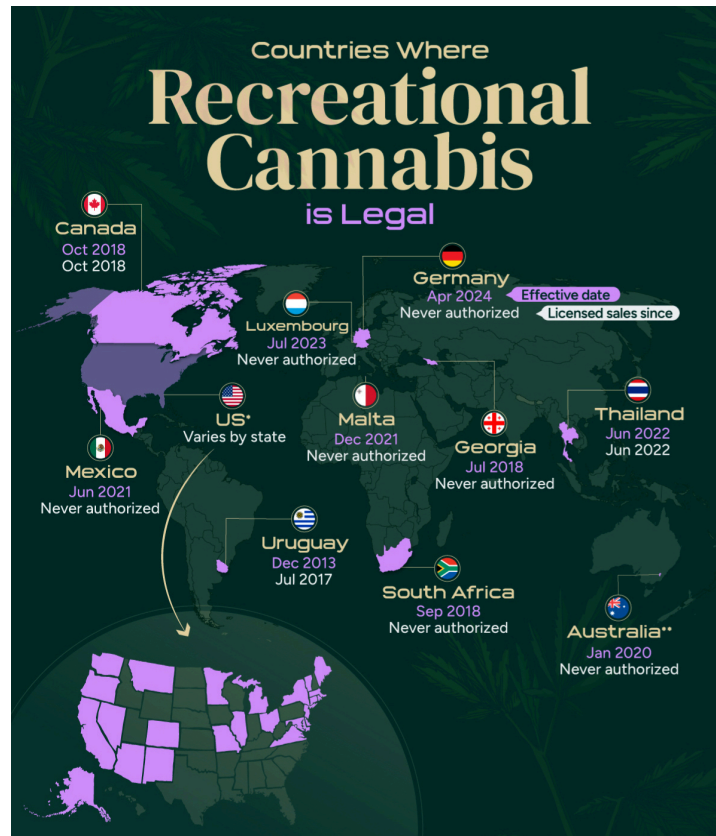


Figure 3: Countries where cannabis is legal, with the effective date and date of licensed sales, as of May 2024. As of June 2025, marihuana has been classified as a controlled herb and banned from recreational use in Thailand. Source: Visual Capitalist.

Harm reduction

Harm reduction involves understanding that drug abuse is a complicated, multi-faceted issue and that demand reduction requires programs such as prevention, treatment, and rehabilitation. There is no universal definition or formula for implementing harm reduction programs; however, previous examples include needle and syringe exchange programs in the Netherlands, opioid substitution therapy programs in some U.S. states, and drug consumption rooms in Switzerland. Combined with providing information and knowledge to allow individuals to make choices favorable to their quality of life, significant positive impacts were observed in countries, including decreases in HIV transmission, overdose deaths, and public drug use. Nevertheless, despite the scientific evidence and increasing international recommendations, punitive policies and practices continue to undermine the progress of harm reduction, necessitating international cooperation and the exchange of information.

Possible Solutions

Judicial oversight

One potential solution is to enforce accountability for human rights violations resulting from the war on drugs, including extrajudicial killings, arbitrary detention, torture, and discrimination against minorities. This can be done by conducting independent investigations and reports, with the assistance of NGOs, on threats and violence against ordinary citizens, human rights defenders, and politicians, while conducting public awareness campaigns to assist victims of human rights abuses to provide evidence for alleged governmental abuses. Members of the police and all levels of government officials who have conducted unlawful acts in the war on drugs should be tried in independent national courts, and international courts should condemn and review state violence tied to the war on drugs. Furthermore, the strengthening of judicial oversight for drug-related offenses requires ensuring the right to a fair trial, with high-quality legal assistance available when needed, and the right to life by abolishing the death penalty. This solution also protects the right to social security and freedom from torture, adhering to the *International Guidelines on Human Rights and Drug Policy* and ICCPR.

Sentencing reform

By eliminating mandatory minimum sentences for non-violent drug offenses and offering alternatives, such as community service, rehabilitation, and treatment, in court trials, individuals would be guaranteed health goods and services on a non-discriminatory basis, enjoying the highest attainable standard of physical and mental health. Rather than imposing automatic sentences, judges should consider individual circumstances, such as offenders' socioeconomic context and mental health, when evaluating sentences for drug possession and low-level trafficking, ensuring that punishments fit the severity and context of the situation. Drug treatment courts should be established, where judges work with health professionals to integrate social services such as pre-trial diversion and post-trial alternatives into the criminal process. Additionally, by supporting rehabilitation over punishment, human rights violations such as mass incarceration, disproportionate punishment, and arbitrary detention would all be reduced or eliminated, protecting the fundamental human rights stemming from the war on drugs through a resilient legislative system. However, on a practical scale, budget allocation should shift from an emphasis on drug enforcement to one on treatment, and governments should invest in mental health training and expanding rehabilitation clinics to construct a system that reaches most, if not all, people who need it.

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