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**INCB 141<sup>st</sup> session  
Consultation with Member States:  
The human rights dimension of the drug control conventions**

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***Statement on the rights of children, youth and women***

Excellencies, ladies and gentlemen,

This year's Board consultation with Member States is dedicated to the human rights dimensions of the drug control conventions, which include the key objectives of safeguarding children's and youth rights and promoting women's rights and achieving gender equality. Full respect for these internationally recognized human rights are a condition for full and effective compliance with the drug control conventions, while violations of any of these rights in the name of drug control policy are inconsistent with the drug control conventions.

Regarding the fundamental goal of the drug control conventions, namely safeguarding health and welfare, there is a human rights obligation to ensure non-discrimination and equal treatment. This also means protecting the right of all women, children and youth to non-discriminatory access to health care, rehabilitation and social services. There are negative impacts of drugs on these specific population groups that require enhanced protection and application of a human rights-based approach to the laws, policies and practical measures applied to them.

The Board has routinely called on Member States to collect and share disaggregated data to obtain a better understanding of the specific needs of these population groups when they are affected by drug use, particularly to improve prevention, treatment and rehabilitation. Reaching these groups that may have heightened vulnerability, however, remains a challenge, including for developing and adapting interventions to adequately respond to their needs and protecting them from exposure to drugs or the negative consequences of drug use in their environment – for example, heightened risks of domestic violence and other drug-facilitated criminal activity.

The Board has consistently encouraged Governments to respect all human rights norms and to adopt drug control measures and policies that protect children from drug use and ensure that national drug control strategies are in the best interests of the child. This would be in line with article 33 of the core related human rights treaty, the Convention on the Rights of the Child, which stipulates the legal obligation to protect children from the illicit use of narcotic drugs and psychotropic substances, as

defined in the treaties, and to prevent the use of children in the illicit production and trafficking of such substances.

The Convention on the Rights of the Child and the drug control treaties, therefore, jointly enshrine the obligation that Member States must protect children from drug use and their involvement or exploitation in drug trafficking. The need to address drug use and dependence, in particular among young people, has also been the subject of CND resolutions. In CND resolution 61/9, for example, on protecting children from the illicit drug challenge, INCB was invited “in cooperation with relevant entities, within their respective mandates, to further explore how the current international legal drug control framework could be used more efficiently, taking into account, as appropriate, for States parties, the relevant human rights conventions, to protect children from the use of illicit drugs and prevent the involvement, use and exploitation of children in the illicit cultivation of crops, illicit production and manufacturing of and trafficking in narcotic drugs and psychotropic substances and other forms of drug-related crime.”

In its past reports and statements, the Board has highlighted that children exposed to illicit drugs after birth may suffer significant problems that require additional care, resulting in both personal expenses and costs to society. While the age of initiation of drug use tends to correspond to the age group of 15 to 24, the Board has highlighted the importance of starting prevention interventions early in life, including even at the prenatal stage and in early and middle childhood. The Board has, moreover, continued to stress that children and youth need to be particularly protected from the non-medical use of controlled substances, while ensuring availability for medical purposes.

The treatment needs of special populations, including children and adolescents, has therefore been consistently raised by the Board. Protection in this regard is not an abstract endeavour but an essential element for balanced drug control policy that must also be compliant with human rights norms, and requires adopting the best approaches for different populations of children. For example, children in custodial settings; those “in street situations”; and migrants and refugee children require varying, targeted interventions that may be different from those used with other children. A wide range of interventions, and not one single approach, can be adopted to meet the stated goals of the drug control conventions, as long as they adhere to international human rights norms and obligations.

Promoting a healthy lifestyle in children, preventing trauma and other childhood adverse events are crucial in decreasing the environmental and socioeconomic determinants that may lead to drug use later in life.

With respect to the Board’s attention to the impact of drugs on specific populations, the Board has regularly expressed its position that gender perspectives need to be effectively mainstreamed in drug-related policies and programmes. The Board has encouraged Member States to address the specific needs of women in the context of drug policy, and the related human right to health, including the right to be free from torture, non-consensual treatment or compulsory drug detention centres, and experimentation.

As articulated in CND resolution 59/5, social barriers can hinder the access of women to treatment for drug use, and women can be acutely affected by the particular consequences of drug use, such as sexually transmitted diseases. The

Board has highlighted in dedicated thematic chapters of its annual reports that women who use drugs may face many difficulties, including high levels of stigmatization or being ostracized by their family or community. These experiences impact the ability of women to enjoy their human rights and fundamental freedoms, particularly to non-discrimination and equality.

The Board calls attention to the treatment afforded to women prisoners – and their children, recommending the improved provision of, and access to, gender-sensitive, trauma-informed, women-only comprehensive treatment programmes. Such improvements would additionally yield results in crime prevention, as well as for diversion and sentencing purposes. Overall, however, there continues to be inadequate data on the level of and funding for such gender-sensitive drug-dependency treatment programmes, and there is insufficient data at the global level on the numbers of women who use drugs among prison populations.

Alternatives to incarceration in appropriate cases of a minor nature can further assist with protecting the rights of women and children, who may have to be imprisoned together or the child becomes separated from the caregiving mother and becomes homeless. Details about the conditions of women incarcerated worldwide was the focus of previous reporting of the Board, with recommendations that Governments need to take into consideration the specific needs and circumstances of women subject to arrest, detention, prosecution, trial or the implementation of a sentence for drug-related offences, drawing on appropriate human rights standards and standard minimum rules such as the Bangkok, Tokyo, and Nelson Mandela Rules.

In recent years, the Board has additionally highlighted how women and children can be in a vulnerable position, often socio-culturally and economically disadvantaged. With respect to narcotic crop growers, they may be frequently marginalized in terms of their relationship to government structures and may fall under the influence of criminal networks. These disadvantages have made it more difficult to mobilize women and youth for alternative development.

This statement's call, during this 2024 Member States consultation, requests recognition that human rights are universal, without any diminishment for the protection and fulfilment of the human rights of children, youth, and women. This requires reiterating our collective commitment as the international community to respect and protect the inherent dignity of all individuals. These are not the only population groups for which discrimination must be eliminated. Nonetheless, this discussion today aims to highlight the dedicated efforts of INCB over the past years to look at the implications for drug policy development worldwide with respect to the protection of these groups.

The hope with this year's consultation is that Member States will continue their efforts to take into consideration the specific needs and circumstances of women and children in drug control policies and programmes and to continue collecting and sharing all relevant data, disaggregated sufficiently by the above-mentioned factors, to ensure targeted policy interventions that can meet the specific needs and circumstances of people who use drugs.

Practitioners and policy makers need all possible support to promote the safe and healthy development of children and the appropriate incorporation of gender perspectives into drug-related policies and programmes. For this reason, the Board continues to call for more funding and resources to prevent and treat drug use among

these population groups and removing the social and legal barriers that continue to prevent the provision of all necessary support to women, children and youth.

INCB's view has consistently been that the international drug control system aims at the promotion of the health and welfare of humankind through a flexible framework that is grounded in compliance with the principles and obligations of three drug control treaties and internationally recognized human rights norms. It is only through this human-rights based approach that women and children will be able to achieve the highest attainable standard of health and all key elements of their human rights will be protected.

Thank you.