

2010

# Project Report

(Final)

**[ WAR AGAINST HIV, NOT DRUG USERS ]**

**Title of the project:** War against HIV not Drug Users

## **Background:**

Pakistan is the second largest country in the South Asian region with an estimated population of 172.8 million having geographic location next to Afghanistan, the world's largest producer of illicit opium. Like other countries in the South Asian region, Pakistan has almost the same demographic and health profile, characterized by high rates of infant and maternal mortality, low levels of literacy and poor access to health care. Additionally, already crunched health budgets are being stretched to deal with a growing problem of drug dependency and injecting drug use and more recently the HIV/AIDS epidemic.

The laws of narcotics control in Pakistan are strict for any kind of use or trade of the illicit drugs in the country. Different government departments are responsible for the control of drug trafficking in the country. The Control of Narcotics Substance Act (CNSA) 1997 is the latest legal document that explains the offenses under different sections and also suggests punishment for the specific offense. Along with CNSA the Islamic law; Prohibition (Enforcement of Hadd) Order 1979, also prohibits the manufacture, owning and possession of the intoxicants. Bottling of any intoxicant, its possession, sale and service is also made punishable under this law.

These laws mostly cover the legal aspects for the control of narcotics rather than caring for health and rights aspect of the drug addicts. The rights of the drug users are delimited that drive them towards a marginalized group of the society. The increasing number of drug dependants and especially the number of injecting drug users are witnessed that the efforts for the illicit drug control in country have been unsuccessful. No attention has been paid to the education and information component while making the drug policies. The drug control programs in Pakistan until now have been found to be more inclined towards the punitive side. Not only the ratio of HIV infection amongst the IDUs has reached an all time high of 21%, but HIV transmission in Pakistani prisons has also become a major concern for the country. There is least focus on the Rights Based Approaches.

Society for Sustainable Development (SSD) initiated a project which aimed at supporting and advocating for a policy to focus on "War against HIV & AIDS" not on "War on Drug Users". This project is supported by Open Society Institute. The project goal is to provide support in development of a Policy for Drug Users which is based on Rights Based Approaches. This policy will address their fundamental rights which will ultimately help in mitigating the impact of HIV. The project was divided into two phases. The first phase was based on the activities included Rapid Situational Analysis, Dissemination of the Findings of the study, Review Meetings, National Forum and Review and documentation of Recommendations. The second phase of the project is the continuation of the First Phase of the project. A shadow policy will be prepared after discussing all the findings of the project and finally this shadow policy will be discussed with the parliamentarians to table it before the parliament to make it a policy.

The proposal for the project was submitted in November 2008 for the duration of one year from January 2009 to December 2009 to OSI; however only the 1<sup>st</sup> phase of the project was approved and granted to SSD by the end of January 2009. The 1<sup>st</sup> phase of the project has been implemented according to the scheduled activities despite of uncertain conditions of the country. The hiring of the project staff was completed in the month of January 2009. The project was initiated with the opening ceremony in the last week of January 2009 in which stakeholders from the public and private sectors were invited. The introduction and details of the project were shared with the stakeholders. The idea of the project was accepted and appreciated by all the stakeholders. Immediate to the opening ceremony, the consultant reviewed the existing documents related to the drug laws and policies being implemented in Pakistan. The literature review was completed in the mid of February 2009. After the literature review, the consultant conducted a rapid situational analysis (RSA).

The Rapid Situation Analysis was initiated by the identification of national, provincial and other relevant stakeholders for the purposes of consultation as well as the drafting of a semi-structured questionnaire for administration to the identified role-players. The main aim of RSA was to consult with national stakeholders on issues to drug laws in Pakistan, in order to identify gaps in the narcotics laws. While this initial phase of the study was constrained to a certain extent due to the large number of questionnaires that were not returned in time, the breakdown of responses indicated a broad spread of information from different levels of government and civil society across a number of areas in Pakistan. The RSA was completed in the month of April 2009.

Then the findings of the study were shared with major stakeholders in May 2009. The review meetings were also organized in May and June 2009 and finally the recommendations for the alternative National Drug Policy has been developed with the consensus of all stakeholders after the last meeting held in the third week of June 2009. And then the recommendations were shared with all the stakeholders in the national forum in July 2009. All The recommendations for more balanced drug policy has been reported and disseminated to the stakeholders, active partners and civil society organization working for the cause.

## **b) Project goals**

This project aimed at “War against HIV & AIDS” not on “War against Drug Users”. HIV transmission in Pakistani prisons has become a major concern for the country. Alongside this, the government's focus on illicit drug supply-reduction has resulted in the prison becoming progressively more populated with individuals serving sentences for drug-related crimes and using drugs. There is least focus on the Rights Based Approaches. Injection drug use and high-risk sexual behaviors are key contributing factors to the transmission of the human immunodeficiency virus (HIV). These behaviors have been identified in international research as two of the most common modes of HIV transmission in the prison setting. They have also been identified as main contributing factors to increasing rates of HIV infection in Pakistan generally and hence elevated rates of HIV infection through the sharing of injection equipment. Punitive drug policies have

been unsuccessful and have led to the increase of HIV and the violation of human rights. Even though AIDS and drugs are two key public health issues, they are dealt with in completely different manners. While the response to AIDS is information, education and treatment, the response to drugs are punitive policies that criminalize those that use them without educating and informing them on the effects of each drug and the ways to reduce the risks involved in their use. This results in violence, stigma and discrimination, the spread of HIV and other serious diseases, and the violation of the fundamental rights to health and information.

The main goal of the project is to provide support in and advocate for the development of policies and laws regarding drugs in the country which are rights based, non discriminatory and non-stigmatizing.

The main objectives of the project are as follows:

- To advocate for development of policy which is rights based, non discriminatory and non stigmatizing
- To review the existing policies and laws in the country related to drugs and to collect recommendations making the policies more balanced and rights based
- To Develop a shadow national drug policy based on the recommendations of the forum of experts through a consultative process
- To advocate through different means including advocacy activities for adaptation of the shadow drug policy
- To advocate against incarceration or forced institutionalization of drug users who have not committed any crimes
- To support debates that question forced eradication, seizure and interdiction measures that violate civil liberties or undermine democracy, and in some cases threaten security and stability within nations
- To demand effective and human treatment of drug users inside prison and out, and insist on better guidelines from the UN on defining evidence-based drug treatment
- To promote the need for countries to escape the US/UN diktat of a “**drug free world**” and illustrate the need for countries to demonstrate greater flexibility in implementing local or regional solutions.

## **Activities Report:**

The second phase of the project is the continuation of the grant against the project “War against HIV, Not drug Users”, which was funded by Open Society Institute for the first phase in January 2009. The first phase of the project was completed in July 2009.

A national forum of key stakeholders was organized on 15<sup>th</sup> July 2009 in Islamabad, in which the representatives of National and provincial AIDS Control Programmes, Anti-Narcotics Force, Ministry of Narcotics Control, UNAIDS, UNODC and NGOs participated. In that forum the findings of the provincial review meetings were shared and the participants were requested to discuss the shortfalls in the national drug policy in the light of the findings collected from the review of the existing drug laws in the country

and the input given by the stakeholders who were interviewed during the early phase of the project.

The 2<sup>nd</sup> phase of the project was initiated after the approval of proposal in August 2009 by the Open Society Institute. The activities took place according to the schedule however some of the activities were delayed due to terrorist attacks in different parts of the country.

After the national consultation a comprehensive document was developed in order to review of the existing laws and policies regarding drug use in the country and compilation of the recommendations gathered through the review meetings and consultations in order to make the policy more balanced, non discriminatory, non-stigmatizing and more rights based. This document was shared with all the stakeholders electronically and their suggestions were incorporated.

Those who are working with drug users and those who are working on HIV especially on high risk groups were the integral part of the group. The forum was supported by consultants with vast experience of working with drug users and specially injecting drug users. Through the brainstorming sessions and productive discussions, the recommendations from the stakeholders were gathered. These recommendations helped in developing of a national drug policy which is more rights based.

#### **National Consultative Forum and Recommendations:**

A national forum of key stakeholders was organized on 15<sup>th</sup> July 2009 in Islamabad, in which the representatives of National and provincial AIDS Control Programmes, Anti-Narcotics Force, Ministry of Narcotics Control, UNAIDS, UNODC and NGOs working for the prevention and control of HIV and AIDS participated. In that forum the findings of the provincial review meetings were shared and the participants were requested to discuss the shortfalls in the national drug policy in the light of the findings collected from the assessment of the existing drug laws in the country through the process of provincial review meetings and the input given by the stakeholders who were interviewed during the early phase of the project. The heated discussion was observed at this forum and the stakeholders showed their serious concern regarding the violation of the rights of the drug users in the country. The recommendations developed through this discussion are as under:

1. The drug users should be given the rights as a common human being in the country. They are treated inhuman by the law enforcement agencies contradictory to the actual law. There is no space in the law to arrest and lockup those who are addicts of any sort of drugs however, the police department consider them criminals and put them to bars while charging any other offense. Such operation of the police department is criminal which should be reviewed and proper action should be taken against such arrests.
2. The action against drug traffickers should be strict and their networks should be demolished instead of arresting the drug addicts. It is the responsibility of Ministry of narcotics Control and Anti Narcotics Force to take action and bring a change in policy for the rights of the drug users and motivate police department to take care of the rights of drug users.

3. The drug users are human being and it is the responsibility of the society to rehabilitate them and bring them back to the normal life. There is no provision of the excessive rehabilitation centers in the government policies except a few which are not fulfilling the requirement of even 5% of the total drug addicts in the country.
4. The stigma attached with the drug addicts should be removed by the active action taken by the government with the help of civil society organizations. Such stigmatizing attitude of the society and practice of calling them with bad names discriminate them and they become isolated which can become a greater cause for the spread of drug addiction as well as infections like HIV and STIs.
5. The rigid attitude of the society can never be helpful in motivating the drug users in bringing them back towards normal life. It is the sympathetic and caring attitude which could be helpful in rehabilitating them. Therefore, it is the responsibility of the government and civil society organizations to provide them environment that could be supportive and convincing to quit drugs and care for their own lives and families.
6. The health facilities are not sufficient for the drug addicts. Most of them have no access to these facilities. It is the responsibility of the government to establish rehabilitation centers and encourage NGOs for this purpose. There is a need to establish drop-in-centers in various parts of the country where the drug users could access the facilities of health and counseling.
7. In order to make the new generation safe from drug addict, there is a need to introduce some information in the curriculum in which the bad affects of drug use and its impact of the individuals and society should be included. The new generation should aware of the harmful effects of drugs.
8. The families of the drug addicts should be treated with extra care and counseled properly in order to save them from any infection or mental disorder of the spouses and children.

### **Consultation in Lahore (Punjab):**

The first consultation with all major stakeholders in Punjab including Punjab AIDS Control Programme, UNAIDS, NGOs working for the prevention of HIV and AIDS in Punjab and the provincial Health ministry and health providers and legal experts was organized on August 04, 2009 in Lahore. In this consultative meeting the stakeholder were briefed about the progress of the project and the presentation about the recommendations of the national forum was given. This consultation had the objective to discuss the national recommendations and to collect input and suggestion for developing an Alternative/Shadow Drug Policy.

In the light of national recommendations, the participants of the consultation gave their suggestions highlighting their own experience handling with DUs, IDUs, their families and the criminals who were involved in drug trafficking. They also shared that how drug traffickers make addict the normal people of drugs. They shared that once a person becomes addict of any drug, he can easily become injecting drug user. The participants of the consultation were agreed with the national recommendations and helped in developing few more recommendations which are as followed.

1. There should be provision in the law to register the drug users by the health departments of the government and NGOs working for the rights of Drug users. The excessive availability of narcotics on medical store should be banned except those registered drug users. There should also be provision for new syringes free of cost for the addicts on medical stores and drop-in-centers.
2. A proper mechanism should be developed in order to assess whether the drug users are using the new syringes while injecting drugs or they re-use and share.
3. There should also be provision in the policy that health providers would treat the drug users as they treat normal people. If health providers fail to do so, the drug users should have the right to get free legal assistance for action against them.

### **Consultation in Karachi (Sindh):**

The second provincial consultation for reviewing the national recommendation to develop Alternative/Shadow Drug Policy was held in Karachi on 10<sup>th</sup> August 2009. For this consultation, member of provincial legislative assembly, representatives of provincial governments, federal government, legal experts and representatives of civil society working with drug users were invited.

The invitees participated in this consultation were; a member of Sindh assembly, representatives of the public health department, Provincial AIDS Control Programme, Pakistan Society and Sindh NGOs Network on HIV and AIDS and other organizations working on HIV and AIDS and drug users.

The participants were briefed about the national recommendation and the provincial consultation held in Lahore (Punjab). The participants were requested to include their suggestions with regard to their own province. The main issue raised by the NGO representatives in this consultation was the high interference of the police department during service delivery. They suggested that there is a great need to change the behaviour of police that discriminates the drug users and usually arrests them and put into bars for months charging criminal allegations on them. The member of provincial assembly assured them to take action against such attitude of police and would insure their help in locating the drug users for service delivery. The following recommendations were developed from the process of consultation in Sindh.

1. The police department should provide help to NGOs and other service providers for drug users in locating them and adopt sympathetic attitude towards drug users instead of dealing with them as criminals.
2. Free legal assistance should be provided to the drug users who are accused of any other offense.
3. Sufficient number of rehabilitation centers should be established by the government and NGOs should also be allowed to establish such centers in order to cope with the greater number of drug users.
4. The policy should have the provision of job security of drug users. The law should not permit any government agency or private employer to fire any person on the offense of using drug before or after employment. The employers should be responsible for such employees' treatment and rehabilitation. However, drug trafficking or exchange should not be allowed.

5. The government should provide employment opportunities to the drug users in order to lessen their stress and provide them free health facilities.
6. Society should provide healthy support activities to all the young generation to lessen the involvement of youth in drugs.

### **Consultation in Quetta (Baluchistan):**

The third consultation of the series was organized by Society for Sustainable Development in Quetta (Baluchistan) on 18<sup>th</sup> August, 2009.

In the meeting the member of Baluchistan provincial assembly participated. The other participants were health minister Baluchistan, representatives of Provincial AIDS Control Programme, private health practitioners, lawyers and representatives of social organizations working for rights of women and children, drug users and NGOS working for the prevention and control of HIV and AIDS.

The participants were introduced with the project and an overall national and provincial situation regarding the drug use, spread of HIV and rights of drug users and their families was presented. The national and provincial recommendations regarding the Alternative drug policy were also discussed in detail.

Through this consultation the stakeholders from Baluchistan government and civil society organizations understood the situation and came up with their solid recommendations which are as under:

1. Baluchistan shares border with Afghanistan and that is the main cause in increasing number of drug users. The government should strictly control the drug trafficking from Afghanistan border. The drug user should be identified and given free treatment.
2. Unemployment is the main cause of drug use in the country and especially in Baluchistan; therefore it is necessary to generate employment resources for the young people.
3. The drug user should be treated as normal human being and the police attitude with them should not be harsh. The police and the society should provide proper rights to the drug users and should take care of their legal rights as well.
4. Free legal aid should be provided to the drug users if their basic rights have been violated at any stage.

### **Consultation in Peshawar (NWFP):**

The forth consultation for the discussion and recommendation on the existing drug laws, finding of RSA, drug policy review and review of national recommendations was held in Peshawar on 21<sup>st</sup> August 2009. In this consultation, member of provincial legislative assembly, representatives of provincial governments including provincial AIDS Control Programme, legal experts and representatives of civil society and NWFP AIDS Consortium (NAC) working with drug users participated.



The project coordinator presented the situation of drug users in Pakistan and described the factors that involved in converting most of the drug users into injecting drug users. The project Coordinator also highlighted the issues related to stigma and discrimination attached with drug users and their families. He pointed out that our existing narcotics law has no provision for the rights of drug users. The national and provincial recommendations were also presented. The participants were agreed upon the national and provincial recommendations and also suggested following points for the more balanced drug policy:

1. The government hospital should provide all the medical facilities equally to drug users as these are being provided to other people.
2. The provision of new syringes for IDUs is insufficient. This services delivery component should be active and responsive to the requirement.
3. Some of the prisoners in the jails are also addicts. The NGOs should be allowed to visit them at least once in the week for their counseling and service delivery.
4. The families of the drug users should be treated as normal human beings and stigmatizing attitude should be removed by the society as well as by the government officials by bringing them back to the main stream of life.

#### **Consultation in Gilgit (Northern Areas):**

The fifth consultation of the series was organized by SSD in Gilgit (Northern Areas) on 28<sup>th</sup> August, 2009, for the discussion and recommendation on the existing drug laws, findings of RSA drug policy review and recommendations collected from national and provincial consultations.

The participants of the consultation were representatives of the public health department, Northern Area AIDS Control Consortium (NAACC) and other organizations working on HIV and AIDS and drug users.

Following recommendations were developed from this process:

1. The drug users should not be treated as normal people because of their mental stress that causes for them being drug users due to any social problem, therefore they need extra care and support. The sympathetic attitude can be helpful in bringing them back to normal stream of life.
2. The drug policy should address their social issues and include the solution for their problems.
3. The NGOs and CSOs should be motivated for service delivery for drug users and their families.
4. The concept of punishment by police and society should be removed from the policy, instead they should be given legal and other human rights.
5. If they are agreed for the treatment, they should have right to hide their identity in order to be saved from the stigmatizing attitude of the society.

## **Consultation in Islamabad (Capital):**

The final consultation was organized in Islamabad on 27<sup>th</sup> August, 2009. In this national level consultation the invitations were sent to all the stakeholders including ministry of health, ministry of narcotics control, ministry of law, ministry of youth affairs, Ministry of Education, heads of government hospitals, National AIDS Control Programme (NACP), Anti Narcotics Force, UNODC, UNAIDS, UNICEF, UNFPA, FHI, and other NGOs working for the rights of PLHIV and Drug Users. The participation level was not up to the expectation because of security issues and month of Ramadan. However, the representative from ministry of narcotics, ministry of education, ministry of youth affairs and health ministry, UNAIDS, UNODC, NACP, government hospitals and some representatives from NGO sector participated in the consultation.

The provincial recommendations were discussed in detail and the concerned authorities were agreed upon most of the recommendations and suggested to formally represent those recommendations by involving some parliamentarians for further discussion at the forum of national assembly.

## **Media Consultations**

Society for Sustainable Development (SSD) organized five media consultations with the media persons of renowned news papers of the country. One media consultation was organized in each of the four provincial headquarters and the last media consultation was organized in Islamabad, the Federal Capital. The Literature review, findings of RSA and recommendations of consultative forum were shared with the media representatives and in the light of those recommendations the following points were discussed in these media consultations:-

- It was observed that print media has a pivot role to change the behavior of general public. Therefore, a need was felt to highlight the problems and issues of the DUs and IDUs in the news articles to change the general misperceptions amongst the society.
- An awareness campaign should be launched to educate the relatives, especially the family of the Drug Users to reduce the stigma and discrimination against them.
- Special messages should be published in the news paper to educate the general public about their basic human rights and to specially safeguard the basic human rights of DUs by highlighting the events of violence against a drug user.
- A need was felt to conduct a research study about the imprisonment of Drug Users who are in jail for just possessing a small amount of drug for their own use.
- All the participants of these consultations appreciated the Project theme and suggested valuable changes in the policy which are incorporated in the recommendations for policy change.

## **Recommendations for Policy Change.**

In the light of all the activities, consultations, group discussions and dialogues amongst the policy makers, law enforcing agencies, experts and project team the following

recommendations are being presented before the parliamentarians to make the human drug policy.

1. The drug policy should focus on treatment rather than criminal punishment. Different treatment options should be advised to the drug users instead of custodial sentences. In addition, the Drug Users can be given choice between treatment and imprisonment. The Drug Users should be treated as Patient rather than a criminal.
2. The arrested drug users should be referred to some treatment centre provided there is no other criminal offence has been done by him. This can be done even after giving some initial imprisonment for the offence.
3. The quantity for personal use should be redefined in the light of the best practices of the world. Small quantity possession of drugs should be completely decriminalized this will lessen the burden on courts. And the law enforcement agencies will get more time to control the other criminal issues rather than dealing with drug users.
4. It is also important that the term Drugs should not be used in a generic way but there is a need to make the policy according to the characteristics of each substance.
5. Effective Specialized Drug Courts should be introduced to deal with the drug related crimes, which can differentiate the drug use cases from drug trafficking.
6. Harm reduction programs should be encouraged to reduce the spread of HIV/AIDS and Hepatitis “C” amongst the drug users and Injecting Drug Users. As it is evident through various studies conducted in the country that the spread of HIV & AIDS amongst the Injecting drug users is on the high. One of the main reasons is the use of dirty/infected needles by Injecting Drug Users. Therefore, the needle exchange programs should be encouraged in the country.
7. Drug Policy should address the “**Harassment of Drug User by Police**”. Because it has been observed that the police and Law enforcing agencies are involved in violation of the Basic Human Rights of the drug users.
8. The Control of Narcotic Substances Act (CNSA), 1997 concerns about drug trafficking have overshadowed domestic problems of drug use, treatment and rehabilitation of drug users. The Drug policy should be focused on the control of drug trafficking and the drug addiction cases should be referred to the public health system for rehabilitation.
9. The Prohibition (Enforcement of Hadd) Order makes use of intoxicants a serious offence. The CNSA, on the other hand, does not criminalize drug users. Instead, the Act obligates the government to identify, register, treat and restore drug users back to the community. The two statutes are at variance vis-à-vis the legal treatment accorded to persons with drug related problems. Whether an addict in contact with authorities finds himself in prison for violating the Hadd Order or is able to seek treatment at a centre established under the CNSA remains unclear. This anomaly should be eliminated.
10. No specific provision has been made for drug dependent children either in the Ordinance or the rules enacted there under, besides medical treatment for juveniles suffering from serious illnesses including TB, Hepatitis B and C, and HIV/AIDS. Therefore there is a need to introduce specific provision to deal with such children.

11. There is an urgent need to address the issue of Oral Substitution Therapy in the drug policy as it is going to be a major step toward harm reduction. Oral Substitution therapy can play a very important role in harm reduction with specific reference to HIV& AIDS. This has proved very successful in some countries like Iran where OST has not only helped in Harm Reduction but also helped in reducing the Drug Production. Unfortunately, Pakistani law has no provision for facilitating OST.
12. Presently, the HIV positive drug addicts fail to get ART treatment unless they have gone through the detoxification program. But very limited detoxification services are available to them. Therefore, there is a need that all the harm reduction programs must have the component of detoxification incorporated at the moment very few organization and institutes are offering detoxification services to the current drug addicts. The successful model of low cost community based care and support can be very helpful in this regard. This model has already been successfully implemented in the neighboring country India.

### **Social Factors in Drug Addiction**

The following social factors should also be given due attention to provide a healthy environment to the drug users who are seeking treatment and for those who can not live with out taking the drugs.

1. Awareness program should be introduced to educate the general public about the basis human rights.
2. Efforts should be made to reduce stigma and discrimination for Drug Users, so that they can be treated as normal human being. Dependence on drugs should not be treated as crime. This will also help to reduce the discriminations against the families of the drug users.
3. Equal job opportunities should be provided to the rehabilitated drug users regardless of their past habits.
4. Causes of the drug dependence should be highlighted and effective measure should be taken to counter such causes.
5. Access to public health facilities should be equal for drug users as these are being provided to other people.
6. Free legal aid should be provided to the drug users if their basic rights have been violated at any stage.
7. In order to make the new generation safe from drug addiction, there is a need to introduce some information in the curriculum in which the bad affects of drug use and its impact of the individuals and society should be included. The new generation should aware of the harmful effects of drugs.
8. Finally, the war should be against the drugs but not against the drug users.

## **Seminar for Parliamentarians**

In order to involve the policy makers in the project a seminar was organized by the Society for Sustainable Development (SSD) in Islamabad due to the present security problems the seminar was not publically announced. However, a few parliamentarians, representative of Law enforcing agencies, Narcotics control agencies, civil society representatives and other individual working in the field of HIV & AIDS participated in the seminar. Chairman SSD welcomed all the participants on behalf of the organization and project staff. National Manager, SSD presented briefly the scope, objectives, goals and findings of the project. Later on the recommendations were handed over to the parliamentarian, who showed a keen interest to discuss the policy in the parliament at length and assured to work on it in the near future. Finally the Chairman presented vote of thanks to the participants with the remarks that this is not the end but this is the beginning of a new paradigm shift in the policy making of Drug Controls.

## **Follow up Seminar**

Follow up seminar will be conducted once the Policy will be discussed in the parliament. We hope that by the end of April 2010 the comments and feedback from the parliaments committee will be finalized. Therefore, the follow up seminar will be conducted in the month of May 2010.

## **Sustainability**

In order to sustain the valuable work done through this project, Society for Sustainable Development (SSD) a sister concern of Society for Sustainable Development (SSD) has shown its willingness to do all the awareness and advocacy work. Society for Sustainable Development has already provided their technical support to carry out this project successfully.

## **Conclusion:**

After decades of mass incarceration and ever-increasing sentencing levels evidence indicates that law enforcement measures are not an effective means of reducing the extent of the illicit drugs market. The overly repressive enforcement of the global prohibition regime has caused much human suffering, disrupting family lives and subjecting those convicted to disproportionate sentences in often abominable prison conditions. It has overburdened the judicial system and prison capacity and has absorbed huge resources that could have been made available for more effective treatment, harm reduction and crime prevention programs, as well as allowing law enforcement to focus on organized crime and corruption. It is evident from the best practices used by several countries that, the removal of criminal sanctions for the possession of drugs does not lead to a significant increase in drug use or drug related harm. Criminalizing users pushes them away from health services out of fear of arrest, drives them into the shadows, and locks them up in prisons, which serve as schools for crime. This cycle derails lives even more than drug dependence itself and diminishes chances of recovery. This also applies to the way drug users are treated when committing nonviolent property crimes to sustain their habit. The 1961 Convention, the backbone of the global drug control model, already

endorsed the principle that “when abusers of drugs have committed... offences, the Parties may provide... as an alternative to conviction or punishment ... that such abusers shall undergo measures of treatment, education, aftercare, rehabilitation and social reintegration...” (Art. 36.1b). . There is a strong case to make for substantially revising sentencing guidelines, reducing penalties for those involved at lower levels, with no organizing responsibility, low earnings, and connected to the illicit market due to economic necessity. Existing evidence indicates that harsher penalties fail as a deterrent to the individual and have no discernible impact on the way the illicit market operates. The paradigm shift from zero tolerance to harm reduction has resulted in a greater diversity of treatment options, less stigmatization of drug users, prevention of diseases and overdoses, and reduction of crime. But this model, originally conceived as a response to heroin injection and HIV. The changing legal practices in several countries is clear evidence that a paradigm shift in drug control is starting to take root in legislative reforms around the world. Drug consumption is seen more and more as primarily a health issue and policy objectives are shifting from the unrealistic goal of a drug-free society toward more achievable goals of harm reduction and reducing drug-related violence. Consideration of human rights and proportionality of sentences are becoming essential elements in a growing number of countries’ application of drug legislation. Today’s trends are creating legal contradictions to the obligations set in the UN treaties. The resultant tensions and discord will only increase until the zero-tolerance model of the three conventions is readdressed.