









This publication was prepared and published by the Eurasian Harm Reduction Association (EHRA), a non-profit, membership-based public organisation that unites and supports more than 300 Central and Eastern European and Central Asian (CEECA) harm reduction activists and organisations to ensure the rights and freedoms, health and well-being of people who use psychoactive substances. For more information, visit the website: <https://harmreductioneurasia.org>

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# ACRONYMS

**ADHD**

Attention Deficit Hyperactivity Disorder

**ART**

Antiretroviral Therapy

**CAT**

Committee Against Torture

**CBO**

Community-Based Organisation

**CCPR**

Covenant on Civil and Political Rights

**CEDAW**

Committee on the Elimination of Discrimination against Women

**CEECA**

Central and Eastern Europe and Central Asia

**CESCR**

Committee on Economic, Social and Cultural Rights

**CRC**

Committee on the Rights of the Child

**CRPD**

Committee on the Rights of Persons with Disabilities

**EECA**

Eastern Europe and Central Asia



<b>EHRA</b>	Eurasian Harm Reduction Association
<b>HCV</b>	Hepatitis C Virus
<b>HIV</b>	Human Immunodeficiency Virus
<b>ICF</b>	International Charitable Foundation
<b>OST</b>	Opioid Substitution Therapy
<b>PLHIV</b>	People Living with HIV
<b>REAct</b>	Rights – Evidence – ACTion
<b>STI</b>	Sexually Transmitted Infections
<b>TB</b>	Tuberculosis
<b>UNODC</b>	United Nations Office on Drugs and Crime
<b>VOLNA</b>	Ukrainian Network of People who Use Drugs



# BACKGROUND

The criminalisation of drugs drives systemic and widespread violations of virtually all human rights guaranteed by national constitutions and international human rights treaties. Documenting these violations can serve the purpose of informing human rights treaty bodies about human rights violations falling under their respective mandates. By July 2022, the following human rights treaty bodies issued drug policy recommendations concerning EECA countries<sup>1</sup>:

- Committee on Economic, Social and Cultural Rights (CESCR)<sup>2</sup>
- Human Rights Committee (CCPR)<sup>3</sup>
- Committee Against Torture (CAT)<sup>4</sup>
- The Committee on the Rights of Persons with Disabilities (CRPD)<sup>5</sup>
- Committee on the Rights of the Child (CRC)<sup>6</sup>
- Committee on the Elimination of Discrimination against Women (CEDAW)<sup>7</sup>

These recommendations are the result of the documenting of human rights and subsequent submissions of documented reports to human rights treaty bodies by civil society groups with the direct engagement of people who use drugs. This work shall continue in order to facilitate the implementation of the recommendations at national level as well as to keep informing constructive dialogue between the human rights treaty bodies and states of the EECA region concerning the implementation of human rights treaties with respect to people who use drugs.

- 
- 1 See Annex I with reference to all concluding observations of the UN Human Rights Treaty Bodies concerning drug policies in EECA countries.
  - 2 The CESCR has issued drug policy recommendations to Belarus, Estonia, Kazakhstan, Kyrgyzstan, Russia, Tajikistan, Ukraine, and Uzbekistan.
  - 3 So far the Human Rights Committee has issued drug policy recommendations to Russia only.
  - 4 So far the CAT has issued drug policy recommendations to Russia only.
  - 5 So far the CRPD has issued drug policy recommendations to Russia only.
  - 6 So far the CRC has issued drug policy recommendations to Ukraine only.
  - 7 CEDAW has issued drug policy recommendations to Kyrgyzstan and Russia.



# PURPOSE

The purpose of this Matrix is to facilitate the analysis of documented human right violations by grouping violations into strategic blocks that are easy to use for the subsequent reporting to human rights treaty bodies and/or as part of follow-up advocacy at national level; and to equip human rights activists with knowledge/skills in how to prepare/write reports for a human right body. The Matrix aligns the analysis with the environment in which human rights treaty bodies and national governments develop human rights practices, surrounded and mediated by community-led monitoring.

The assessment of each block of violations corresponds to state human rights obligations according to international human rights covenants and, where appropriate, specific human rights conventions. Each item in a block can become the subject matter of simultaneous assessments under different sections of international treaties. For example, each item of violations of the right to be free from discrimination can be assessed in light of the right to health; the right to be free from torture and another forms of ill-treatment; the right to respect for private and family life; as well as all rights guaranteed by specific human rights conventions (CEDAW, CRC, CRPD).





# BLOCKS OF HUMAN RIGHTS VIOLATIONS



## 1. VIOLATION OF THE RIGHT TO BE FREE FROM DISCRIMINATION WITH OR WITHOUT CONNECTION TO VIOLATIONS OF OTHER HUMAN RIGHTS

*Background information:* The principle of non-discrimination is a general principle in the protection of human rights and fundamental freedoms. This principle is enshrined in every human rights treaty (for example, Article 2 of the *International Covenant on Civil and Political Rights*, and Article 2 of the *International Covenant on Economic, Social and Cultural Rights*). For this reason, the analysis of key human rights violations through the prism of non-discrimination provides activists with a broad range of opportunities for advocacy and cooperation with all human rights treaty bodies.





## DISPROPORTIONATE USE OF CRIMINAL/ADMINISTRATIVE SANCTIONS DUE TO THE CRIMINALISATION OF DRUG USE/SIMPLE POSSESSION<sup>8</sup>

### Example:

**The case of D.P., a 42-year-old man living with drug dependence from Lesosibirsk, Russia**

**The court rejected a motion by the defence to have additional or independent forensic examination of the seized substances to establish the purity.**

*Mr. D.P. suffers mental and behavioural disorders due to dependence on multiple drugs (opioids and synthetic drugs), combined with an unspecified personality disorder. In 2018, he was sentenced for possession of 0.28 grams of a herbal mixture with trace amounts of synthetic cannabinoids; in 2020, he was sentenced for possession of 2.98 grams of a mixture with trace amounts of heroin. The court imposed a combined total punishment of 45 months imprisonment for both crimes. In both cases, the amount of narcotic drug in the seized mixture was not established. The court rejected a motion by the defence to have additional or independent forensic examination of the seized substances to establish the purity. The defence argued that when the purity is not established, the accused shall enjoy the benefit of doubt and the court shall assume that the purity was not higher than the sensitivity of laboratory equipment – 0.0001%. With such a purity, the defence argued, the amount of narcotic in Mr. D.P.'s possession was similar to trace amounts of narcotics on banknotes or other items that occasionally come into contact with narcotics and become contaminated. Thus, according to the defence, the offence of Mr. D.P. was at best insignificant, and his overall behaviour was not so blameworthy as to trigger such a heavy punishment as 45 months of imprisonment. The trial court and the court of appeal ignored all arguments of the defence and calculated the punishment as if Mr.D.P. possessed pure narcotic substances. As of May 2022, Mr. D.P. is still in prison<sup>9</sup>.*

<sup>8</sup> There is no universal definition of a term 'simple possession'; for the purpose of this matrix, 'simple possession' is defined as possession with no intent to distribute as part of wholesale commercial trafficking.

<sup>9</sup> Report to the 135<sup>th</sup> Session of the UN Human Rights Committee in relation to the review of the 8<sup>th</sup> Periodic Report of the Russian Federation CCPR/C/RUS/8. Russian Civil Society Mechanism for Monitoring of Drug Policy Reforms, May 2022.  
[https://tbinternet.ohchr.org/Treaties/CCPR/Shared%20Documents/RUS/INT\\_CCPR\\_CSS\\_RUS\\_47727\\_E.pdf](https://tbinternet.ohchr.org/Treaties/CCPR/Shared%20Documents/RUS/INT_CCPR_CSS_RUS_47727_E.pdf) (accessed 10 November 2022).



## DISPROPORTIONATE USE OF SEVERE CRIMINAL SANCTIONS DUE TO THE LACK OF DELINEATION BETWEEN SOCIAL DISTRIBUTION AND WHOLESALE COMMERCIAL TRAFFICKING

### Example:

The case of M. Z., 24 years old, Belarus

**However, M.Z. was later indicted with the crime of trafficking under Part 3 of Article 328 because, in his first testimony, A. said that M.Z. gave him a prohibited substance.**

*Mr. M.Z. was sentenced to eight years in a penal colony under Article 328 of the Criminal Code of the Republic of Belarus. On February 22, 2017, M.Z.'s cousin, A., came to visit M.Z. at about 11:00a.m. Later that day, M.Z. walked with A. to the bus stop and neither of them were seen again. The next day 5:00 a.m., police called M.Z.'s mother to inform her that both M.Z. and A. had been detained for drug crimes under Part 1 of Article 328. However, M.Z. was later indicted*

*with the crime of trafficking under Part 3 of Article 328 because, in his first testimony, A. said that M.Z. gave him a prohibited substance. As the word "gave" appeared in the testimony, police were able to apply Part 3, rather than Part 1 of Article 328. The court convicted M.Z. for drug trafficking and sentenced him to eight years imprisonment in a high-security prison<sup>10</sup>.*



10

Report to the Committee on Economic, Social and Cultural Rights: The implementation by Belarus of Article 12 (the right to health) with respect to people who use drugs and people living with HIV. HIV Legal Network and the Eurasian Harm Reduction Association, February 2022.

<https://www.hivlegalnetwork.ca/site/report-to-cescr-on-belarus/?lang=en>  
(accessed 10 November 2022).





## GENDER-BLIND APPLICATION OF CRIMINAL/ADMINISTRATIVE LAWS, INCLUDING PREGNANT WOMEN

### Example:

**The case of a 'U.K.', a pregnant woman living with drug dependence, HIV and HCV in Yekaterinburg, Russia**

**No medical help or social support was offered to U.K. by the State.**

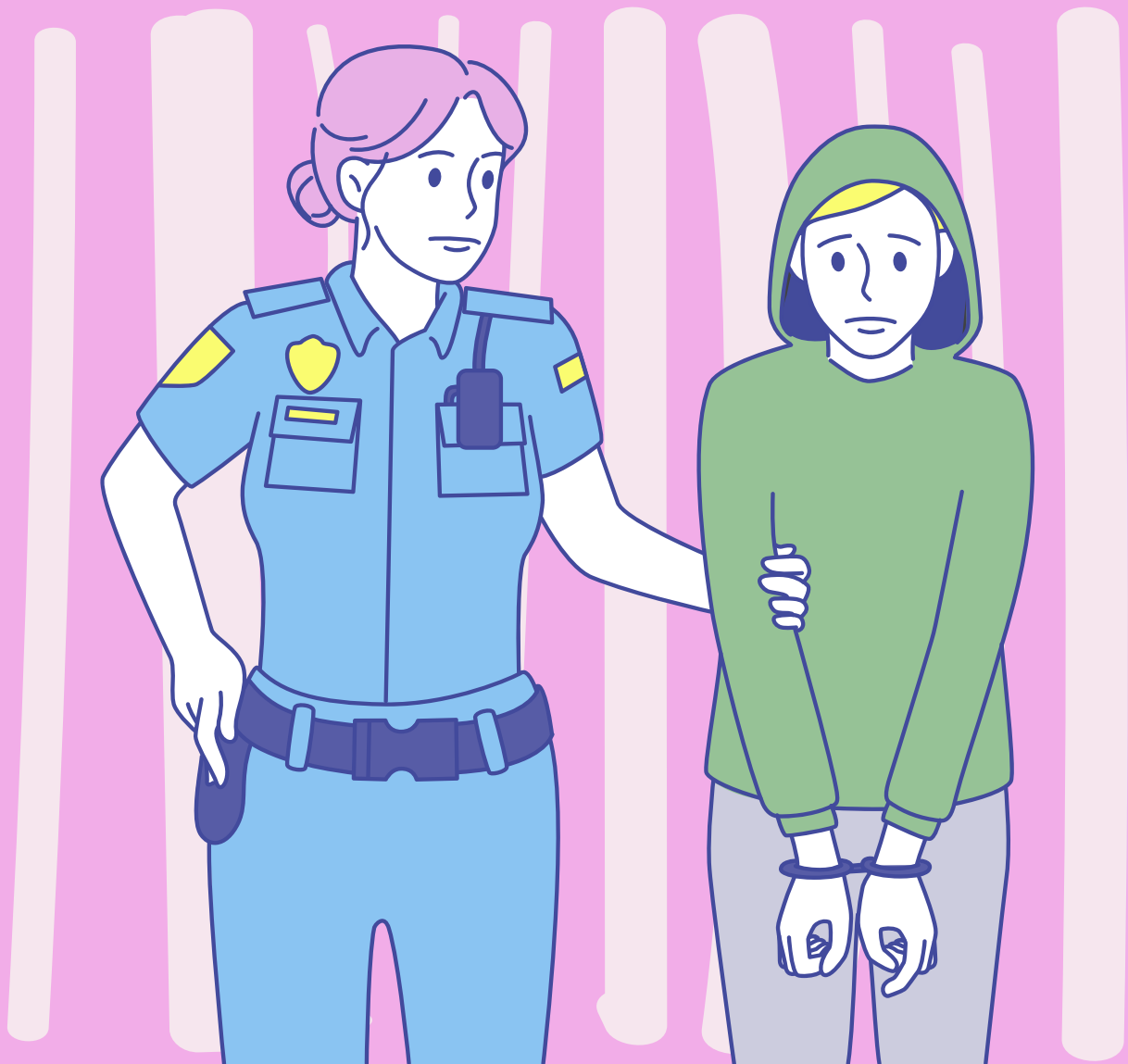
*In April 2017, U.K. was sentenced to 200 hours of mandatory labour for helping two fellow drug users to purchase 0.25 grams of a synthetic cannabinoid online. No medical help, educational or social support was offered to her. In June and July 2017, the police stopped U.K. twice next to her house to check whether she was intoxicated and/or possessed any drugs. During the last engagement with the police in July 2017, U.K. had 0.53 grams of a synthetic cannabinoid with her. This was categorised as a large amount of drugs. She had hepatitis C (HCV) and diabetes mellitus, had recently learned about her HIV status and was at an early stage of pregnancy. Due to her health conditions, U.K.'s defense filed a non-custodial application. She already had an agreement with a private rehabilitation centre to undergo rehabilitation. No medical help or social support was offered to U.K. by the State. The court sentenced her to three years in prison. After being sentenced, U.K. was left in pre-trial detention where she was not provided with adequate medical care which resulted in premature delivery with severe negative impact on the child's health<sup>11</sup>.*

11 Report to CEDAW for the List of Issues in relation to the 9<sup>th</sup> Periodic Report of the Russian Federation CEDAW/C/RUS/9. Russian Civil Society Mechanism for Monitoring of Drug Policy Reforms, 2020.  
[https://tbinternet.ohchr.org/\\_layouts/15/treatybodyexternal/Download.aspx?symbolno=INT%2fCEDAW%2fICO%2fRUS%2f42550&Lang=en](https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=INT%2fCEDAW%2fICO%2fRUS%2f42550&Lang=en)  
 (accessed 10 November 2022).



## 2. VIOLATIONS OF HUMAN RIGHTS IN THE CONTEXT OF DRUG ENFORCEMENT

*Background information:* Drug enforcement might fall under the legitimate reasons for limiting some human rights and fundamental freedoms in the interests of national security or public safety, public order (for example Articles 19, 21 and 22 of the *International Covenant on Civil and Political Rights*), or for the purpose of promoting the general welfare in a democratic society (Article 4 of the *International Covenant on Economic, Social and Cultural Rights*). It is important and strategic to document cases where drug enforcement demonstrably oversteps the boundary of reasonable limitations of human rights and fundamental freedoms, such as in the following examples.





## MISUSE OF WITHDRAWAL SYNDROME OR STIMULANT-RELATED PSYCHOSIS TO OBTAIN EVIDENCE

### Example:

#### REAct case, male, aged 38 years from Uzbekistan

**He was detained for 3 days in a police department.**

*In January 2021, a male using drugs was detained by officers of the criminal investigation department on suspicion of stealing a mobile phone. He was detained for 3 days in a police department. The officers saw injection marks on his hands and tried to make him become an informant or confess to the crime. He was subjected to physical violence (they hit his head with a heavy book numerous times). Moreover, no actions were taken to eliminate withdrawal symptoms (the client felt sick and shivered, was shaking). After three days, without getting him to confess his guilt in stealing the phone, they released him and gave him a certificate stating that he had been absent from work (for three days) for a good reason. But he was fired anyway, and he is currently unemployed and has nothing to feed his family<sup>12</sup>.*

### Example:

#### The case of L.S., a woman living with drug dependence and HIV in Kaliningrad, Russia

**Without reading the statement carefully, she thought that she had confessed to aiding drug purchase for personal use.**

*On January 16, 2016, at 11:30 a.m., L.S. was arrested by police for non-medical use of drugs. Police acted on a tip from their informant who had used opioids with L.S. about 21 hours before her arrest, on the afternoon of January 15, 2016. Police knew about L.S.'s drug dependence. At the time of her arrest, and later in the police station, police officers saw that she was suffering from acute withdrawal syndrome; she was sweating heavily, shivering and experiencing nausea and diarrhea. The investigator told her that they could charge her either with the crime of attempting to sell drugs or a less serious crime of drug possession. According to an investigator, this would depend on whether she confessed. At that point, she just wanted to leave the police station because she was about to start vomiting and soiling her pants. She*

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This case was registered in the REAct database by one of the participating CBOs in Uzbekistan.  
<https://react-aph.org/en/>



also knew that no medical help would be offered to her in a police station. Under such duress, L.S. signed a confession statement which had been pre-drafted by an investigator. Without reading the statement carefully, she thought that she had confessed to aiding drug purchase for personal use. The investigator later categorised her statement as aiding drug trafficking<sup>13</sup>.

## ARBITRARY ARRESTS ON THE STREET DUE TO APPEARANCE; ARRESTS OF YOUNG PEOPLE AS PART OF POLICE RAIDS IN CLUBS AND AT MUSIC FESTIVALS

### Example:

**REAct case, male, aged 35 years, from Kyrgyzstan**

**When I sat in the car, they started insulting me and talking rudely.**

*In October 2020, a client of the Opioid Substitution Therapy (OST) programme in one city arrived at the dispensing site. He was waiting for his friend near the site when a black car stopped next to him. There were two men in ordinary clothes (not uniforms), one got out of the car and approached him. The client stated, "He said that he was from the militia and that I have to get in the car, that we need to talk. When I sat in the car, they started insulting me and talking rudely. They said that they know that some of us are selling drugs here at the substitute therapy centre. They said that I must pull out everything that I have in my pockets. He examined me. Having not found nothing illegal, they told me that if they see me here again, the conversation will be different and not here. They warned me that they will drop some drugs on me and then jail me. Now I am afraid to visit that OST site..."<sup>14</sup>.*

### Example:

**The case of Y. and A., 28 and 26-year-old women from Moscow, Russia**

*On 12 October 2020, Y. and A. were stopped on the street by a police patrol for no obvious reason. The police demanded that the women undergo drug tests. The women refused. After several hours*

13 Report to the 135<sup>th</sup> Session of the UN Human Rights Committee in relation to the review of the 8<sup>th</sup> Periodic Report of the Russian Federation CCPR/C/RUS/8. Russian Civil Society Mechanism for Monitoring of Drug Policy Reforms, May 2022.

[https://tbinternet.ohchr.org/Treaties/CCPR/Shared%20Documents/RUS/INT\\_CCPR\\_CSS\\_RUS\\_47727\\_E.pdf](https://tbinternet.ohchr.org/Treaties/CCPR/Shared%20Documents/RUS/INT_CCPR_CSS_RUS_47727_E.pdf) (accessed 10 November 2022).

14 This case was registered in the REAct database by one of the participating CBOs in Kyrgyzstan. <https://react-aph.org/en/>



of verbal abuse and threats of violence against Y. and A., the police charged both women with the offence of drug use because according to Article 6.9 of the Code of Administrative Offences, a fact of drug use is presumed if a suspect refuses to undergo drug testing at the request of police. On 11 December 2020, Pokrovo Strashnevo district court in Moscow sentenced both women to fines for the alleged nonmedical use of drugs<sup>15</sup>.

## POLICE PROVOCATION (POLICE ENTRAPMENT)

### Example:

**Narrative section of the Shadow Report with respect to the 135<sup>th</sup> Session of the UN Human Rights Committee, to the review of the 8<sup>th</sup> Periodic Report of the Russian Federation**

**In other words, this offence would not take place if not for the incentives created by police or a police agent.**

*Police provocation (police entrapment) occurs when police create incentives for a person to commit an offence. In other words, this offence would not take place if not for the incentives created by police or a police agent. Russian police often use drug dependent people to incite another fellow drug user to purchase and hand over a narcotic drug, thus essentially creating all the conditions for the behaviour that the police document and categorise as drug trafficking. The European Court has issued multiple judgments concerning police provocation in Russia from 2005 to 2021 (Vanyan v. Russia, no. 53203/99, ECHR 2005; Khudobin v. Russia, no. 59696/00, ECHR 2006; Bannikova v Russian Federation, no. 18757/06, ECHR 2011; Veselov and others v Russia, nos. 23200/10, 24009/07 and 556/10, ECHR 2012; Kuzmina and others v. Russia, no. 66152/14 and 8 others, ECHR 2021). Despite this, Russian courts continue to admit evidence received as the result of police provocation<sup>16</sup>.*

15 REAct database, Ibid.

16 Report to the 135<sup>th</sup> Session of the UN Human Rights Committee in relation to the review of the 8<sup>th</sup> Periodic Report of the Russian Federation CCPR/C/RUS/8. Russian Civil Society Mechanism for Monitoring of Drug Policy Reforms, May 2022. [https://tbinternet.ohchr.org/Treaties/CCPR/Shared%20Documents/RUS/INT\\_CCPR\\_CSS\\_RUS\\_47727\\_E.pdf](https://tbinternet.ohchr.org/Treaties/CCPR/Shared%20Documents/RUS/INT_CCPR_CSS_RUS_47727_E.pdf) (accessed 10 November 2022).



**Example:**

**REAct case, male, aged 35 years, from Kyrgyzstan, June 2021**

*The client left the methadone therapy site and went home. He had a five-day dose of methadone with him. On the way home, he was stopped by two men (not in uniform). They presented themselves as police officers. Without explaining the reasons, they forced him to sit in the car and delivered him to a district station. Not respecting any COVID-19 safety measures, they kept him in an overcrowded room. They searched his personal belongings and found methadone. There were no confirmatory documents, so they could keep him until clarification and confirmation of his words. At the same time, one officer offered to release him if he helped to solve the crime of trading of psychoactive substances on the site of the methadone replacement therapy programme. The client had to perform a controlled purchase from a person with whom he does not even communicate on the site located in the district. The client refused the offer and was stigmatised and physically abused. Later that day, the client was released<sup>17</sup>.*

**ILL-TREATMENT BY POLICE TO OBTAIN EVIDENCE OR ON THE BASIS OF DISCRIMINATION**

**Example:**

**REAct case, male, aged 35 years, from Kyrgyzstan, June 2021**

**In exchange for drugs, they offered the client a guilty plea in a fraud crime. Police officers held the client in the internal affairs department for more than 4 hours.**

*The client came to the substitution site to obtain methadone. Upon entering the site, some unknown people introduced themselves as police officers, forced the client to sit in the car and took him to one of the police stations of the district department of internal affairs. Soon, the client had drug withdrawal symptoms, accompanied by severe muscle pain, nausea, headache, profuse sweating and drowsiness. In exchange for drugs, they offered the client a guilty plea in a fraud crime. Police officers held the client in the internal affairs department for more than 4 hours. At the same time, they did not allow him to go to the substitution site to receive treatment. After not getting a confession from the client, the police officers kicked the client out of*

17

This case was registered in the REAct database by one of the participating CBOs in Kyrgyzstan.  
<https://react-aph.org/en/>



*the office without any arrest documents. The client was threatened with subsequent detention and criminal prosecution if he complained. The client refused to write a complaint<sup>18</sup>.*

**Example:**

**The case of G.K., a HIV-positive, drug-dependent woman from Moscow, Russia**

**She was held in a police station for eight hours until she started showing obvious signs of withdrawal syndrome.**

*On April 4, 2014, at 6:00p.m., G.K. was arrested by police. She was intoxicated with heroin during the arrest. She was held in a police station for eight hours until she started showing obvious signs of withdrawal syndrome, such as vomiting, sweating, shivering and diarrhea. After this, police offered her a pre-drafted self-incriminating statement to sign, which she did without reading. Then, in exchange, police brought her to a medical clinic, where her withdrawal syndrome was documented by medical doctors (documents are available in a case file). During the court hearing, the defence argued the inadmissibility of the self-incriminating statement which was signed under the duress of torture. However, a trial court and a court of appeal rejected this argument and accepted the statement. G.K. was sentenced to four years' imprisonment. In September 2017, her case was communicated by the European Court of Human Rights (ECHR) to the Russian Government<sup>19</sup>.*

## **GENDER-BASED VIOLENCE, INCLUDING RAPE/SEXUAL VIOLENCE**

**Example:**

**REAct case, female, aged 35 years from Uzbekistan**

*In February 2022, in the evening, a client (a woman who uses drugs) was on her way home when three men whom she knew since her childhood invited her to spend the evening together. She agreed to visit their apartment. Shortly after, they physically abused and raped her; after that, they held her in their apartment for three days to prevent her*

18 This case was registered in the REAct database by one of the participating CBOs in Kyrgyzstan.  
<https://react-aph.org/en/>

19 Shadow Report to the Committee Against Torture in relation to the review of the Sixth Periodic Report of the Russian Federation (CAT/C/RUS/6). Russian Public Mechanism for Monitoring of Drug Policy Reform, 2018.  
[https://tbinternet.ohchr.org/\\_layouts/15/treatybodyexternal/Download.aspx?symbolno=INT%2fCAT%2fCSS%2fRUS%2f31610&Lang=en](https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=INT%2fCAT%2fCSS%2fRUS%2f31610&Lang=en)  
(accessed 10 November 2022).



from going to the police. On the fourth day, police released her from the apartment acting upon information about a missing person. Friends of the client suggested that she might be with those men. However, despite the client's appeal to the police, and medical expertise undertaken and the arrest of the suspects, the three perpetrators were only charged with an administrative offence for drug use (15 days of detention) and not for rape or physical violence<sup>20</sup>.

**Example:**

**The case of E.S., a 34-year-old, drug dependent woman living with HIV in Orenburg, Russia**

*As a result of sexual violence at the age of 14 and subsequent bullying by her peers, E.S. started using drugs (marijuana and methamphetamine) at a young age. Later, an acquaintance who wanted her to become dependent on him hooked her on hanka [opium]. As her drug dependence progressed, E.S. turned to injecting heroin. Subsequently,*

**When her apartment was robbed, police officers were reluctant to register her complaint because they knew that she was using drugs.**

*E.S. repeatedly faced threats and violence by her intimate partners and other men around her: they took away her money, drugs and jewelry; committed physical and sexual violence against her; kidnapped her; tried to force her to sell sexual services and to sell her apartment; and stored weapons and stolen goods in her apartment without her consent. When sharing a syringe during collective drug consumption, E.S. was always the last one in*

*the "queue" and, as a result, she soon contracted HIV. She was forced to visit pharmacies alone to buy components for drug use; one day a taxi driver identified her as a drug user and raped her. E.S. could not rely on any help from the police. When her apartment was robbed, police officers were reluctant to register her complaint because they knew that she was using drugs. In the end, a local precinct officer threatened her with criminal prosecution and forced her to have sex with him. E.S. was convicted for drug crimes and sentenced to imprisonment. In the places of detention, she faced disparaging attitudes because of her drug dependence and HIV-positive status. She repeatedly suffered from physical and sexual violence by prison staff<sup>21</sup>.*

20 This case was registered in the REAct database by one of the participating CBOs in Uzbekistan.  
<https://react-aph.org/en/>

21 Report for the List of Issues in relation to the 9<sup>th</sup> Periodic Report of the Russian Federation CEDAW/C/RUS/9. Russian Public Mechanism for Monitoring of Drug Policy Reform, 2021.  
[https://tbinternet.ohchr.org/\\_layouts/15/treatybodyexternal/Download.aspx?symbolno=INT%2fCEDAW%2fCO%2fRUS%2f42550&Lang=en](https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=INT%2fCEDAW%2fCO%2fRUS%2f42550&Lang=en)  
(accessed 10 November 2022).



## EXTORTION OF MONEY BY POLICE

### Example:

**REAct case, male, aged 30 years from Kyrgyzstan**

**The client and his friend managed to find USD600 that they paid to police officers, after which the police released them.**

*In September 2020, police stopped a taxi with a client and his friend on board. Police searched the car and produced a sachet of cannabis raisin that police claimed was found in the cab. After the client and his friend denied any connection to the sachet, police officers demanded USD2,000 from the client and USD1,500 from his friend in order to avoid laying a criminal charge of serious drug possession or trafficking. The client and his friend managed to find USD600 that they paid to police officers, after which the police released them<sup>22</sup>.*

### Example:

**Extract from the Shadow Report to the Committee against Torture to the review of the Fifth Periodic Report of the Russian Federation**

*Extortion is another routine practice. Today, bribe-taking by law enforcement staff is considered something normal and responding to it is an accepted way of avoiding arrest or detention. For police, drug trafficking presents a golden opportunity to earn income. Extortion of money occurs in an atmosphere of constant fear and humiliation when a bribe can look like the best solution to a problem.*

### Example:

**Evidence from a man, aged 29 year from Barnaul, Russia**

*They stop you all the time. Some people they call them “moochers”. They come there [to drug selling sites], catch junkies and rip them off. So just give them a hundred [roubles] and then go fix in peace. They won’t touch you. So they just come to the Ditch [drug selling area] to get some beer money<sup>23</sup>.*

22 This case was registered in the REAct database by one of the participating CBOs in Kyrgyzstan.  
<https://react-aph.org/en/>

23 Shadow Report to the UN Committee against Torture in relation to the review of the Fifth Periodic Report of the Russian Federation. Russian Public Mechanism for Monitoring of Drug Policy Reform, 2012.  
Online: [https://tbinternet.ohchr.org/\\_layouts/15/treatybodyexternal/Download.aspx?symbolno=INT%2fCAT%2fNGO%2fRUS%2f13012&Lang=en](https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=INT%2fCAT%2fNGO%2fRUS%2f13012&Lang=en)  
(accessed 10 November 2022).



## MISUSE OF MEDICAL INFORMATION, INCLUDING AS PART OF MANDATORY REGISTRATION OF PEOPLE WHO USE DRUGS

### Example:

**REAct case, female, aged 35 years from Moldova, September 2021**

*The woman successfully underwent drug dependence treatment in March 2020 and, after a year of stable remission, in July 2021, her registration as a drug dependent person was canceled. In September 2021, she needed a certificate from the drug treatment clinic in order to be able to obtain a driver's license. Despite the fact that she was de-registered, a doctor mandated her to undergo the drug test at her own expense. Such a test was not mandatory for all other candidates, only for her because of her previous registration. Thus, the drug registration is de-facto for life<sup>24</sup>.*

### Example:

**The case of I.A., a 42-year-old drug dependent man from Togliatti, Russia**

*As a result of resorting to drug dependence treatment, I.A. was included in the narcological registry without his informed consent. Being in such a registry entails a significant limitation in the sphere of family rights (deprivation of parental rights, inability to adopt a child or take custody) and labour rights (prohibition to drive a car, to engage in more than 300 occupations). There are no known medical benefits in keeping clients on the registry. De-facto, it is a form of disenfranchisement and civil punishment for being drug dependent. Mr. I.A. challenged the decision in court to include him on the registry. In 2016-2017, the trial court and court of*

*appeal rejected Mr. I.A.'s application with the following justification: "Narcological diseases have an extraordinary social significance. The specific nature of legal relations arising in the provision of narcological assistance is due to personality changes and behavioural disorders,*

**There are no known medical benefits in keeping clients on the registry. De-facto, it is a form of disenfranchisement and civil punishment for being drug dependent.**

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This case was registered in the REAct database by one of the participating CBOs in Moldova.  
<https://react-aph.org/en/>



*the nature of the person, which limits the ability of such patients to consciously direct their actions when deciding on medical intervention. It must also be taken into account that patients with narcological diseases can be dangerous to others because of their high criminal activity.” Thus, the courts confirmed that in Russia, drug dependence is a crime rather than a health condition and, as such, people who are drug dependent shall suffer disenfranchisement as a form of extended civil punishment<sup>25</sup>.*

## ARBITRARY PROSECUTION FOR DERIVATIVES

### Example:

**The case of D.B., a woman living with chronic depression in Yekaterinburg, Russia**

*D.B. has been officially diagnosed with chronic depression and she sees a psychiatrist for help, including prescription medicines. In 2015, Russia excluded the medicine Bupropion from its list of approved medications. D.B. could not buy Bupropion in the pharmacy anymore, so she started ordering it via the internet from Poland. Such activities are not prohibited by Russian laws provided that the ordered medicine is for personal treatment and not for sale. In April 2019, D.B. was arrested in the post office when she received two packs of Bupropion from Poland. A chemist from Russia’s Customs Service concluded that Bupropion is a derivative of psychostimulant ‘Methcathinone’. D.B. was charged with contraband — a crime punishable with imprisonment from 10 to 20 years. In December 2021, police ended their prosecution of D.B.*

**Such activities are not prohibited by Russian laws provided that the ordered medicine is for personal treatment and not for sale.**

*However, similar cases continue in other provinces of Russia. Under similar circumstances, Ms. O.K., a woman with*

*Attention Deficit Hyperactivity Disorder (ADHD), was prosecuted in the city of Volgograd for ordering Bupropion. In addition, on January 10, 2022, law enforcement initiated a criminal case against R.A. who had ordered Bupropion from India to treat his officially diagnosed psychiatric disorder.*

25 Report to the 135<sup>th</sup> Session of the UN Human Rights Committee in relation to the review of the 8<sup>th</sup> Periodic Report of the Russian Federation CCPR/C/RUS/8. Russian Civil Society Mechanism for Monitoring of Drug Policy Reforms, May 2022.  
[https://tbinternet.ohchr.org/Treaties/CCPR/Shared%20Documents/RUS/INT\\_CCPR\\_CSS\\_RUS\\_47727\\_E.pdf](https://tbinternet.ohchr.org/Treaties/CCPR/Shared%20Documents/RUS/INT_CCPR_CSS_RUS_47727_E.pdf) (accessed 10 November 2022).



**Example:**

**The case of A.R., a 29-year-old man with major depressive disorder from Novokuznetsk, Russia**

*Mr. A.R. was diagnosed with depressive disorder in 2010 at the age of 16. Since that time, he has tried many medications. Bupropion was best of all. On 10 January 2022, police arrested the mother of Mr. A.R. at the post office when she was receiving a pouch with Bupropion from India. She was charged with contraband — a crime punishable with imprisonment from 10 to 20 years<sup>26</sup>.*

**LACK OF ACCESS TO LEGAL SUPPORT SERVICES FOR WOMEN WHO USE DRUGS**

**Example:**

**Extract from the Shadow Report to the Committee on Economic, Social and Cultural Rights with respect to Estonia**

*Women who use drugs often face legal challenges such as police prosecutions, legal proceedings related to child protection services, and discrimination in labour and public health matters. Yet there is very limited access to free legal support services. Women report that legal support services related to cases of criminal prosecution are of very poor quality. According to the women interviewed, lawyers provided by the State do not provide a legal defense but, rather, act as an extension of the police<sup>27</sup>.*

**...lawyers provided by the State do not provide a legal defense but, rather, act as an extension of the police.**

26 Report to the 135<sup>th</sup> Session of the UN Human Rights Committee in relation to the review of the 8<sup>th</sup> Periodic Report of the Russian Federation CCPR/C/RUS/8. Russian Civil Society Mechanism for Monitoring of Drug Policy Reforms, May 2022.

[https://tbinternet.ohchr.org/Treaties/CCPR/Shared%20Documents/RUS/INT\\_CCPR\\_CSS\\_RUS\\_47727\\_E.pdf](https://tbinternet.ohchr.org/Treaties/CCPR/Shared%20Documents/RUS/INT_CCPR_CSS_RUS_47727_E.pdf) (accessed 10 November 2022).

27 Parallel Submission for 62<sup>nd</sup> Pre-Sessional Working Group of the Committee on Economic, Social and Cultural Rights (CESCR) with respect to Estonia. The situation with the enjoyment of social rights among women who use drugs and/or living with HIV in Estonia. Canadian HIV/AIDS Legal Network, the Eurasian Harm Reduction Association, and the Estonian Association of People Who Use Psychotropic Substances, 2021.

[https://tbinternet.ohchr.org/\\_layouts/15/treatybodyexternal/Download.aspx?symbolno=INT%2fCESCR%2fICO%2fEST%2f33641&Lang=en](https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=INT%2fCESCR%2fICO%2fEST%2f33641&Lang=en) (accessed 10 November 2022).



### 3. HUMAN RIGHTS VIOLATIONS IN HEALTH SETTINGS, INCLUDING DISCRIMINATORY ACCESS AND/OR POOR AVAILABILITY, ACCESSIBILITY AND QUALITY OF SERVICES



*Background information:* Health is one of the main objectives of the international drug control system. The right to health is guaranteed by Article 12 of the *International Covenant on Economic, Social and Cultural Rights*, and is closely related to, and dependent upon, the realisation of other human rights as contained in the *International Bill of Rights*, including the rights to food, housing, work, education, human dignity, life, non-discrimination, equality, the prohibition against torture, privacy, access to information, and the freedoms of association, assembly and movement. These and other rights and freedoms address integral components of the right to health<sup>28</sup>. It is essential to document the adverse consequences of imbalanced drug control on the rights to health including, but not limited to, the following cases.

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CESCR General Comment No. 14: The Right to the Highest Attainable Standard of Health (Art. 12) Adopted at the Twenty-second Session of the Committee on Economic, Social and Cultural Rights, on 11 August 2000 (Contained in Document E/C.12/2000/4), Para 3.



## LACK OF EVIDENCE-BASED DRUG DEPENDENCE TREATMENT, INCLUDING OST AND STIMULANT USE-RELATED TREATMENT AND REHABILITATION

### Example:

#### REAct case, male aged 27 years from Moldova, August 2021

*The client was hospitalised at the Department of Narcotics with a diagnosis of polydrug use. The client used stimulants and, therefore, was not eligible for substitution therapy programmes. He had acute nervous disorders due to the use of psychoactive substances. After a week, the client got worse, and because of a strong absinthe syndrome, he began to talk to himself. Instead of dealing with this case and giving him more intensive treatment, the doctors simply kicked him out of the hospital calling him an “incorrigible druggie”<sup>29</sup>.*

### Example:

#### The case of A.S., a 37-year-old man living with drug dependence in Kaliningrad, Russia

**In the police station, A.S. experienced severe opioid withdrawal syndrome and confessed in exchange for release on bail.**

*Mr. A.S. died in November 2020 when several of his chronic health conditions severely deteriorated due to stress after police prosecuted him for drug trafficking — a crime he did not commit. A.S. was officially diagnosed with opioid drug dependence in 2006. He unsuccessfully tried drug dependence treatment in Russia 12 times. In 2020, he was denied opioid substitution therapy by the Ministry of Health. In 2019, police forcefully entered A.S.’s house and conducted a search. Although police did not find any prohibited substances in A.S.’s house, A.S. was charged with drug trafficking along with four other people who used drugs. In the police station, A.S. experienced severe opioid withdrawal syndrome and confessed in exchange for release on bail. During the year-long investigation, one of the accused died of an opioid overdose, another one died by suicide, and another died in hospital due to his chronic health condition. Mr. A.S. suffered severe stress due to the prosecution. His health condition deteriorated. From*

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This case was registered in the REAct database by one of the participating CBOs in Moldova.  
<https://react-aph.org/en/>



September to November 2020, A.S. was hospitalised more than 10 times, including symptoms of encephalopathy. No science-based drug dependence treatment was offered to A.S. during the prosecution. On November 29, 2020, A.S. died<sup>30</sup>.

## **LACK OF LOW THRESHOLD ACCESS TO ESSENTIAL MEDICINES, INCLUDING PAIN, HIV/HCV/TB/STI MEDICATIONS**

### **Example:**

**The case of P.S. and G.S., parents of V.P.S. who died of TB in prison, Orsk, Russia**

**We came to the visitation room and waited for V.P.S. Two men carried him in supporting him by his arms.**

*They took V.P.S. [to prison] in the winter, and on 15 July he had a medical examination and there was no TB. But on 14 September, V.P.S. was suddenly put in the prison hospital, and after several days he called us in utter horror and started begging us, “I have lost control of my legs, get me out of here! Corpses are taken out of here every day!” But the prison doctor told us that he was receiving treatment and that we only needed to bring in medicines for him — essential vitamins, iron supplements. We brought him parcels with food, medicines and drinks, but once our daughter got a call from some acquaintance from the colony who said, “D., so and so, your brother does not have anything, the nurses don’t even bring him a bedpan or change a mattress.” A week before his death, V.P.S. was allowed to have a visit. Three of us [relatives] came to the colony, with daughter D. We came to the visitation room and waited for V.P.S. Two men carried him in supporting him by his arms. V.P.S. could hardly sit, could not speak and swallow, his lips were ulcerated white because of pleuritis, he only asked for some water. V.P.S. had 7 days to live. He died within 15 days in the most painful way, under tranquil gazes of doctors and the prison administration. Together with our son’s body, we were given a bag with medicines, which we had sent him. All the pills and ampoules were not even opened. V.P.S. was not given anything. The Head office of the Department of Penitentiary Services of the Orenburg region drafted a report describing how*

30 Report to the 135<sup>th</sup> Session of the UN Human Rights Committee in relation to the review of the 8<sup>th</sup> Periodic Report of the Russian Federation CCPR/C/RUS/8. Russian Civil Society Mechanism for Monitoring of Drug Policy Reforms, May 2022.  
[https://tbinternet.ohchr.org/Treaties/CCPR/Shared%20Documents/RUS/INT\\_CCPR\\_CSS\\_RUS\\_47727\\_E.pdf](https://tbinternet.ohchr.org/Treaties/CCPR/Shared%20Documents/RUS/INT_CCPR_CSS_RUS_47727_E.pdf) (accessed 10 November 2022).



V.P.S., born in 1982, died in the colony 25/5. “On July 14<sup>th</sup>, 2009, V.P.S. had undergone regular X-ray tests — no indicators for active TB had been discovered. On September 14<sup>th</sup> the same year, he was taken to the prison’s medical department due to the worsening of his health. The same day he was hospitalised to the in-patient ward of the medical department. After the examination, a relapse of TB was diagnosed. Despite the treatment that he received from 18<sup>th</sup> to 23<sup>rd</sup> September, the patient’s health was considered serious because of the rapidly progressing HIV infection. On September 23<sup>rd</sup>, he was examined for an application for a compassionate early release due to illness. On September 29<sup>th</sup>, V.P.S. died.”<sup>31</sup>

## LACK OF ACCESS TO HARM REDUCTION SERVICES, INCLUDING LOW THRESHOLD OVERDOSE PREVENTION SERVICES AND HARM REDUCTION SERVICES IN POLICE CUSTODY/PRISON SETTINGS

### Example:

**The case of N., a 46-year-old male living with drug dependence, HIV and hepatitis C, and a client of the community-based organisation, VOLNA, Ukraine**

*On June 8, 2019, N. was arrested and tortured by police in the city of Ivano-Frankivsk, Ukraine. N. was on his way home after a visit to a doctor who had prescribed him enough methadone pills for six days of treatment as part of Opioid Substitution Therapy (OST). Police officers took the methadone from N. Then, while in police custody, N. experienced severe pain and suffering due to opioid withdrawal.*

**N. experienced severe pain and suffering due to opioid withdrawal.**

*He pleaded guilty to possession of narcotic drugs for personal use under Article 309(2) of the Criminal Code and currently faces a minimum punishment of two years’ imprisonment. Police insist that N. possessed methadone pills illegally because he allegedly did not have medical documents with him to prove that the methadone had been given to him by his doctor. VOLNA has registered similar cases of arbitrary arrest, ill-treatment and misuse of power by police against people with drug dependence in the cities of Lysychansk, Kharkiv, Poltava, Odessa and Kyiv. Police officers often seize OST medications from clients under*

31 A. Кузина (23 сентября 2010). «Зона смерти. В России лишение свободы может означать лишение жизни». Газета Московский Комсомолец №25457. In Russian. <https://www.mk.ru> (A. Kuzina. “Death Zone. In Russia, incarceration could mean loss of life.” Moskovsky Komsomolets, No. 25457, September 23, 2010).



*arrest and misuse the pain and suffering that comes from withdrawal syndrome to obtain confessions or information on matters of police interest<sup>32</sup>.*

**Example:**

**The cases of A.K. and S.Z., people living with drug dependence and clients of OST programmes, Ukraine**

*In March 2019, both A.K. and S.Z. were arrested for the possession of drugs under Article 309 of the Criminal Code. They were placed in one of the pre-trial detention facilities in the city of Kyiv. No OST medication was provided to them despite their multiple requests. As a result, they suffered several weeks of severe pain and psychological distress due to acute opioid withdrawal syndrome<sup>33</sup>.*

**Example:**

**REAct case, male, aged 39 years, from Moldova, April 2022**

**Due to the fact that the client wants to switch from the methadone to the buprenorphine programme, he approached the Penitentiary doctors several times.**

*The client had been enrolled in an OST programme since 2018. At present, the client is serving a sentence in a penitentiary and is on a methadone programme there. The client appealed several times to the administration saying that the methadone they give him is weak and that he always feels bad, but no response has been received. Furthermore, methods of handling methadone are quite strange. The nurse responsible for dispensing methadone comes to her shift once every 4 days and pours it into glasses at once for all 4 days and puts it in an open glass in a safe, and during the following shifts gives it to the clients, so the clients get the impression that they are mixing it inexplicably with water or with some medicines, but the client becomes ill after a couple of hours. Due to the fact that the client wants to switch from the methadone*

32 Report to the 67<sup>th</sup> Session of the Committee on Economic, Social and Cultural Rights on the implementation by Ukraine of Article 12 of the International Covenant on Economic, Social and Cultural Rights as it relates to access of people who inject drugs to health services. Ukrainian Network of People who Use Drugs (VOLNA), Ukrainian CO «100% Life», Eurasian Harm Reduction Association, and the Canadian HIV/AIDS Legal Network.

[https://tbinternet.ohchr.org/\\_layouts/15/treatybodyexternal/Download.aspx?symbolno=INT%2fCESCR%2fCSS%2fUKR%2f41277&Lang=en](https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=INT%2fCESCR%2fCSS%2fUKR%2f41277&Lang=en)

(accessed 10 November 2022).

33 Ibid.



*to the buprenorphine programme, he approached the Penitentiary doctors several times, but in response they told him that they do not have such a programme (although the management of the penitentiary institutions claims that buprenorphine is in all institutions), so the client called REActor in search of help. At the moment, the client is being treated with buprenorphine<sup>34</sup>.*

## **DISCLOSURE OF MEDICAL INFORMATION BY HEALTH PRACTITIONERS, INCLUDING AS PART OF MANDATORY REGISTRATION OF PEOPLE WHO USE DRUGS**

**Example:**

**See the case of I.A. on page 22, of this publication**

## **DISCRIMINATION IN ACCESS TO HARM REDUCTION SERVICES, INCLUDING AGE-OR GENDER-RESTRICTED ACCESS TO OST AND OTHER SERVICES**

**Example:**

**An extract from the Shadow Report to the Committee on Economic, Social and Cultural Rights with respect to Estonia**

**Women who use drugs are coerced into abstinence by child protection services with very limited or no social or legal support.**

*Female clients of OST programmes are forced to stop OST and “get clean”, despite the importance of OST for their health and stability. Although a discriminatory provision for the deprivation of parental rights due to drug dependence of a parent was repealed in 2009, child protection services still consider drug use and dependence as reasons for restricting or depriving parental rights, assuming that any substance use puts a child in danger and, thus, is contrary to the child’s interests, even when a parent takes medically prescribed methadone. Women reported strong evidence of child protection services either forcing them to stop OST under the threat of losing custody of their children, or not allowing a child to stay with another parent because this parent was a methadone client. Women who use drugs are coerced into abstinence by child protection services with very limited or no social or legal support. Drug dependence treatment, including OST, is available in Estonia. However, the coverage of OST is assumed to be relatively low (<20%). Child protection services insist that*

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This case was registered in the REAct database by one of the participating CBOs in Moldova.  
<https://react-aph.org/en/>



*drug dependent women stop OST and get clean. This advice in itself is in striking contrast to World Health Organization (WHO) recommendations which state that OST is the most effective type of opioid dependence therapy. However, in addition to this, there is no single drug dependence treatment centre for women with children or during pregnancy. To regain custody of their children, women have to go to an abstinence-based rehabilitation centre for 12 months, immediately find a job (even though the Narva region has an unemployment rate that is double the Estonian average) and equip their apartments to a high standard. On a number of occasions, women lost cases to restore custody of their child because of their low social status (having no regular job) or because there were people with disabilities in their family. There are currently three known cases of women fighting to restore their parental rights and in need of quality legal and social support<sup>35</sup>.*

**To regain custody of their children, women have to go to an abstinence-based rehabilitation centre for 12 months, immediately find a job (even though the Narva region has an unemployment rate that is double the Estonian average) and equip their apartments to a high standard.**

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35 Parallel Submission for the 62<sup>nd</sup> Pre-Sessional Working Group of the Committee on Economic, Social and Cultural Rights (CESCR) with respect to Estonia. The situation with the enjoyment of social rights among women who use drugs and/or living with HIV in Estonia. Canadian HIV/AIDS Legal Network, the Eurasian Harm Reduction Association, and the Estonian Association of People Who Use Psychotropic Substances, 2021.  
[https://tbinternet.ohchr.org/\\_layouts/15/treatybodyexternal/Download.aspx?symbolno=INT%2fCESCR%2fICO%2fEST%2f33641&Lang=en](https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=INT%2fCESCR%2fICO%2fEST%2f33641&Lang=en)  
(accessed 10 November 2022).



## 4. VIOLATION OF THE RIGHT TO INFORMATION

*Background information:* Access to health-related information is an integral component of the right to health. At the same time, freedom to seek, receive and impart information is a component of the right to freedom of expression guaranteed in Article 19 of the *International Covenant on Civil and Political Rights*. The right to freedom of expression can be limited in the interests of national security or public safety, public order, but the limitation must be according to laws and only when necessary, in a democratic society. Documenting arbitrary limitations of access to information by drug enforcement agencies shall include the following items.





## ARBITRARY TERMINATION BY STATE OR PRIVATE ACTORS (FACEBOOK, TWITTER, ETC.) OF WEBPAGES FOR ALLEGED DRUG PROPAGANDA

### Example:

*According to YouTube policy, YouTube does not allow content that encourages dangerous or illegal activities that risk serious physical harm or death. This includes content that depicts abuse of, or giving instructions on how to create, hard drugs such as cocaine or opioids. Hard drugs are defined as drugs that can (mostly) lead to physical addiction<sup>36</sup>.*

## ADMINISTRATIVE/CRIMINAL PROSECUTION FOR THE DISTRIBUTION OF HARM REDUCTION INFORMATION, INCLUDING INFORMATION ABOUT THE SAFE USE OF DRUGS/OVERDOSE PREVENTION/DRUG CHECKING/SAFE SUPPLY

### Example:

**From a narrative section of the Shadow Report to Human Rights Committee in relation to the review of the 8th Periodic Report of the Russian Federation**

*In 2020, government agencies administratively blocked 16,900 webpages or web domains. In addition, 18,800 internet sites remain blocked based on court decisions. Below are some examples of the sweeping use of anti-drug propaganda laws:*

- *Every year, Russian courts impose fines on many thousands of entrepreneurs for selling goods, such as socks or t-shirts, with pictures of cannabis leaves;*
- *In 2021, police prosecuted a renowned Russia journalist, Yurii Dud', for drug propaganda because in two video interviews Mr. Dud' discussed problem drug use. Mr. Dud' was prosecuted even though before the interview he stated, "Drugs are evil. Don't use drugs";*
- *In 2021, a Russian hip hop singer, Morginshtern, was charged with drug propaganda because lyrics of two of his songs included words about drugs and drug use. In 2022, he was charged with drug propaganda because one of his complex tattoos included a picture of a leaf that, according to police, resembled a cannabis leaf;*

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36 Harmful or dangerous content policies. YouTube.  
<https://support.google.com/youtube/answer/2801964?hl=en>



- From 2018 to 2020, courts imposed significant fines on civil society organisations, politicians and journalists for simply informing the public about health, human rights, and scientific and political developments concerning such important public issues as narcotic drugs. None of the prosecuted people or organisations promoted illicit drug use or illicit drugs;
- In 2018, a district court in Moscow fined an HIV prevention organisation, the Andrey Rylkov Foundation, to 800,000 Roubles for printing a small number of leaflets with information aimed at health risks, including the risks of lethal overdose, among people who use stimulants. In April 2020, the court imposed a fine on the same organisation for COVID-19 related information aimed at people who use drugs; and,
- In 2021, police charged a photographer, Elena Karma (Elena Chaplanova), with an administrative offence of drug propaganda for the information project, “Dark Side”. The project documented and published information about drug use and drug distribution among adolescents, including the role of the internet-based market in the distribution of narcotic drugs among adolescents<sup>37</sup>.



37 Report to the 135<sup>th</sup> Session of the UN Human Rights Committee in relation to the review of the 8<sup>th</sup> Periodic Report of the Russian Federation CCPR/C/RUS/8. Russian Civil Society Mechanism for Monitoring of Drug Policy Reforms, May 20221. [https://tbinternet.ohchr.org/Treaties/CCPR/Shared%20Documents/RUS/INT\\_CCPR\\_CSS\\_RUS\\_47727\\_E.pdf](https://tbinternet.ohchr.org/Treaties/CCPR/Shared%20Documents/RUS/INT_CCPR_CSS_RUS_47727_E.pdf) (accessed 10 November 2022).



## 5. OTHER HUMAN RIGHTS VIOLATIONS



### BARRIERS TO ACCESS SOCIAL/MEDICAL SERVICES DUE TO THE LACK OF RESIDENCE REGISTRATION

#### Example:

*In September 2015, Tverskoy district court of Moscow upheld the decision of the health authorities to deny V.P. access to ART due to the lack of residence registration in Moscow. By September 2015, V.P. had been living in Moscow for ten years<sup>38</sup>.*

### FINANCIAL BARRIERS IN ACCESS TO A PASSPORT/ID SERVICES

#### Example:

**REAct case, male, aged 73 years, from Kyrgyzstan, March 2021**

*The client (a former prisoner) asked for help due to the refusal to obtain a passport at a Service Centre for Citizens due to the lack of a permanent place of registration. According to the law on internal migration, the district administration must register people without a fixed place of residence. The client applied to the district administration regarding registration, since the client does not have their own housing. The district administration did not provide any answer. The client's situation was resolved by placing him in a nursing home and registering him there to obtain a passport<sup>39</sup>.*

38      Московский суд отказал сибиряку в лечении ВИЧ без прописки. 10 September 2015. Miloserdie.ru In Russian. <https://www.miloserdie.ru/news/moskovskij-sud-otkazal-sibiryaku-v-lechenii-vich-bez-propiski/> (accessed 10 November 2022). (Moscow court denied Siberian HIV treatment without registration).

39      This case was registered in the REAct database by one of the participating CBOs in Kyrgyzstan. <https://react-aph.org/en/>



**Example:**

**An extract from the Shadow Report to the Committee on Economic, Social and Cultural Rights with respect to Estonia**

**The child protection services used the lack of good quality living conditions and/or the lack of a permanent job as a reason for restricting or depriving parental rights and/or taking a child away from the parents.**

*All the women interviewed reported very little, if any, social support, such as job placement or opportunities to improve their housing conditions to meet the standards required by the child protection services. Instead, the child protection services used the lack of good quality living conditions and/or the lack of a permanent job as a reason for restricting or depriving parental rights and/or taking a child away from the parents. Respondents were left on their own to cope with their mental health, social, financial and juridical problems. The child support services prefer to choose the toughest measure: deprivation of parental rights. For the majority of women who participated in the study, the disclosure of their health status (drug dependence and/or HIV) was the main reason for their unemployment. Unemployment, in turn, decreases their chances for social reintegration and limits their ability to regain custody of their children, given current juridical practice. Six respondents reported violations of their labour rights. Drug treatment in Estonia is organised in such a way that women can hardly combine it with work, as only two options are available: either 12 months at an in-patient rehabilitation centre or OST. Spending 12 months at a rehabilitation centre is not viable for women with children. Neither is it viable for the majority of women with temporary work, who cannot be absent for such a long period of time. OST is a better option for working clients. However, according to national guidelines, the majority of clients have to attend a clinic daily. Take-home options are very restricted, even for clients who have to travel for an hour every day to take the medication. It is often impossible to combine such trips with a work schedule, especially considering the desire of OST clients not to disclose their health status to an employer<sup>40</sup>.*

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Parallel Submission for the 62<sup>nd</sup> Pre-Sessional Working Group of the Committee on Economic, Social and Cultural Rights (CESCR) with respect to Estonia. The situation with the enjoyment of social rights among women who use drugs and/or living with HIV in Estonia. Canadian HIV/AIDS Legal Network, the Eurasian Harm Reduction Association, and the Estonian Association of People Who Use Psychotropic Substances, 2021.  
[https://tbinternet.ohchr.org/\\_layouts/15/treatybodyexternal/Download.aspx?symbolno=INT%2fCESCR%2fICO%2fEST%2f33641&Lang=en](https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=INT%2fCESCR%2fICO%2fEST%2f33641&Lang=en)  
(accessed 10 November 2022).



## DISENFRANCHISEMENT OF PEOPLE WHO USE DRUGS DUE TO MANDATORY REGISTRATION OF PEOPLE WHO USE DRUGS

### Example:

**The case of M.M., male, aged 43 years with drug dependence, in remission for more than 11 years in Russia**

*In 2021, Mr. M.M. filed an application to the State Tax Service to register as an individual entrepreneur providing social support to people living with drug dependence. The Tax Service refused to register Mr. M.M. because Article 22.1 of the Federal Law of 8 August 2001, No. 129-FZ, 'On the State Registration of Corporations and Individual Entrepreneurs', prohibits people with a drug-related criminal record from becoming entrepreneurs in the area of education, social protection and social support. The Tax Service did not consider the fact that Mr. M.M.'s criminal record was for a minor crime of drug possession back in 2006 and that Mr. M.M. stopped using drugs in 2009, remaining in remission for more than 11 years<sup>41</sup>.*

## VIOLATION OF THE RIGHT TO PRIVATE AND FAMILY LIFE BY CHILD PROTECTION SERVICES

### Example:

**An extract from the Shadow Report to the Committee on Economic, Social and Cultural Rights with respect to Estonia**

**Child protection services often act together with the police, including to facilitate the extraction of confessions.**

*Child protection services often act in a similar way to the police and, as such, play a role in drug enforcement. Although they often act like the police, representatives of child protection services are not bound by any procedural rules. Allegedly trying to protect the best interests of the child, they visit parents who live with drug dependence to conduct home inspections (for the inspection of a child's living conditions). During the home inspections, they conduct a house search, obviously without any search warrant; inspect refrigerators to see how much food parents have; search wardrobes to see the number of clothes in the household;*

41 Report to the 135<sup>th</sup> Session of the UN Human Rights Committee in relation to the review of the 8<sup>th</sup> Periodic Report of the Russian Federation CCPR/C/RUS/8. Russian Civil Society Mechanism for Monitoring of Drug Policy Reforms, May 2022.  
[https://tbinternet.ohchr.org/Treaties/CCPR/Shared%20Documents/RUS/INT\\_CCPR\\_CSS\\_RUS\\_47727\\_E.pdf](https://tbinternet.ohchr.org/Treaties/CCPR/Shared%20Documents/RUS/INT_CCPR_CSS_RUS_47727_E.pdf) (accessed 10 November 2022).



and talk to neighbours about the parents, often disclosing their HIV status and/or other health conditions, such as drug dependence. Child protection services often act together with the police, including to facilitate the extraction of confessions. Home inspections are often conducted along with the police; where the police are there allegedly to ensure the safety of the representatives of child protection services. In practice, the presence of the police inside or outside of a house serves to apply additional pressure on the parents. During criminal proceedings, accused mothers often have to sign papers to relinquish their parental rights under the threat that if they do not sign, their children would be sent to an orphanage and later to unknown foster parents, instead of to their grandparents, for example. The police often misuse the fact that an accused person has children to threaten her/him and extract a confession or an accusation or evidence against somebody else<sup>42</sup>.



42 Parallel Submission for the 62<sup>nd</sup> Pre-Sessional Working Group of the Committee on Economic, Social and Cultural Rights (CESCR) with respect to Estonia. The situation with the enjoyment of social rights among women who use drugs and/or living with HIV in Estonia. Canadian HIV/AIDS Legal Network, the Eurasian Harm Reduction Association, and the Estonian Association of People Who Use Psychotropic Substances, 2021.  
[https://tbinternet.ohchr.org/\\_layouts/15/treatybodyexternal/Download.aspx?symbolno=INT%2fCESCR%2fCO%2fEST%2f33641&Lang=en](https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=INT%2fCESCR%2fCO%2fEST%2f33641&Lang=en)  
 (accessed 10 November 2022).



# USEFUL LITERATURE, SUPPORTING ANALYSIS OF TRENDS IN HUMAN RIGHTS VIOLATIONS

- ➔ *National Constitutions to determine what rights and freedoms are constitutionally protected;*
- ➔ *National human rights plans/strategies to understand the national human rights priorities;*
- ➔ *Concluding observations with respect to the national periodic reports to human rights treaty bodies to identify issues and recommendations identified by the treaty bodies during the previous reviews<sup>43</sup>;*
- ➔ *General comments of human rights treaty bodies to help understand complex human rights issues and components of human rights and freedoms<sup>44</sup>;*
- ➔ *Reports by the UN Human Rights Mechanisms<sup>45</sup>, the Office of the UN High Commissioner for Human Rights<sup>46</sup> and other UN programmes and agencies<sup>47,48</sup>, and International Guidelines<sup>49</sup> to demonstrate how to review human rights violations and specific law and policy issues through the prism of different human rights treaties and international policy documents; and,*

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43 The UN Treaty Body Database is a public access service to access Concluding Observations and other documents of Human Rights Treaty Bodies. <https://tbinternet.ohchr.org/SitePages/Home.aspx>

44 Treaty bodies Search is a part of the UN Treaty Body Database; it helps locate General Comments issued by every Human Rights Treaty Body. [https://tbinternet.ohchr.org/\\_layouts/15/TreatyBodyExternal/TBSearch.aspx](https://tbinternet.ohchr.org/_layouts/15/TreatyBodyExternal/TBSearch.aspx)

45 For example, reports, statements and press releases on drug policy and drug use by the UN Special Rapporteur on the right to health. <https://www.ohchr.org/en/special-procedures/sr-health/drug-policy-and-drug-use>

46 For example, Report of the Office of the United Nations High Commissioner for Human Rights. Implementation of the joint commitment to effectively addressing and countering the world drug problem with regard to human rights. A/HRC/39/39. 2018. [https://ap.ohchr.org/documents/dpage\\_e.aspx?si=A/HRC/39/39](https://ap.ohchr.org/documents/dpage_e.aspx?si=A/HRC/39/39)

47 The United Nations system common position supporting the implementation of the international drug control policy through effective inter-agency collaboration. In, The United Nations System Chief Executives Board for Coordination. Second regular session of 2018. CEB/2018/2. Annex I. [https://unsceb.org/sites/default/files/imported\\_files/CEB-2018-2-SoD.pdf](https://unsceb.org/sites/default/files/imported_files/CEB-2018-2-SoD.pdf)

48 UNODC documents on Human Rights. <https://www.unodc.org/unodc/en/Human-rights/index.html>

49 Such as the International Guidelines on Human Rights and Drug Policy. <https://www.humanrights-drugpolicy.org/>

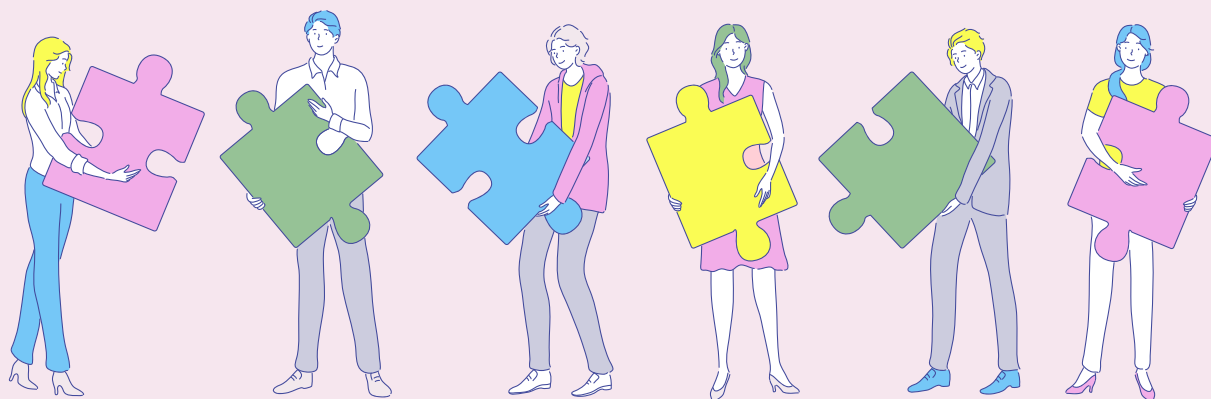


→ *National statistics, media reports, grey literature, articles in peer-reviewed journals concerning people who use drugs and adverse consequences of imbalanced drug policies.*

## EXPECTED OUTCOME

Five-page briefs corresponding to each block of violations with or without annexes, with the following suggested structure:

- **Brief introduction**
- This part shall consist of information concerning the scope of the report (as outlined in the blocks above), available national statistics, national laws and policies concerning the block of issues and the existing human rights treaty bodies' recommendations.
- **Information about human rights violations**
- Brief information concerning each of the identified issues within the block of human rights violations.
- **Recommendations to improve the State Party's implementation of international human rights treaties**
- Short and meaningful recommendations for national level implementers, with the inclusion of specific laws, policies, and practices to reform, as well as the specific ways to undertake the reforms, if applicable.





# EXAMPLES OF

## BRIEF REPORTS

**1**

Parallel Submission for the 62<sup>nd</sup> Session with respect to Russia, 2017.

[https://tbinternet.ohchr.org/\\_layouts/15/treatybodyexternal/Download.aspx?symbolno=INT%2fCESCR%2fCSS%2fRUS%2f28707&Lang=en](https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=INT%2fCESCR%2fCSS%2fRUS%2f28707&Lang=en)

**2**

Report to the 135<sup>th</sup> Session of the UN Human Rights Committee in relation to the review of the 8<sup>th</sup> Periodic Report of the Russian Federation CCPR/C/RUS/8, 2022.

[https://tbinternet.ohchr.org/\\_layouts/15/treatybodyexternal/Download.aspx?symbolno=INT%2fCCPR%2fCSS%2fRUS%2f47727&Lang=en](https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=INT%2fCCPR%2fCSS%2fRUS%2f47727&Lang=en)

**3**

Report to the 67<sup>th</sup> Session of the Committee on Economic, Social and Cultural Rights on the implementation by Ukraine of Article 12 of the International Covenant on Economic, Social and Cultural Rights as it relates to access of people who inject drugs to health services, 2020.

[https://tbinternet.ohchr.org/\\_layouts/15/treatybodyexternal/Download.aspx?symbolno=INT%2fCESCR%2fCSS%2fUKR%2f41277&Lang=en](https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=INT%2fCESCR%2fCSS%2fUKR%2f41277&Lang=en)

**4**

Report in relation to the 9<sup>th</sup> Periodic Report of the Russian Federation, CEDAW/C/RUS/9, 2021.

[https://tbinternet.ohchr.org/\\_layouts/15/treatybodyexternal/Download.aspx?symbolno=INT%2fCEDAW%2fCSS%2fKGZ%2f42885&Lang=en](https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=INT%2fCEDAW%2fCSS%2fKGZ%2f42885&Lang=en)



## ANNEX I

# DRUG POLICY RECOMMENDATIONS ISSUED BY THE UN HUMAN RIGHTS TREATY BODIES CONCERNING EECA COUNTRIES

### HUMAN RIGHTS COMMITTEE

1. Concluding observations on the seventh periodic report of the Russian Federation. Human Rights Committee. CCPR/C/RUS/CO/7. 28 April 2015. Paras 16-17.

[https://tbinternet.ohchr.org/\\_layouts/15/treatybodyexternal/Download.aspx?symbolno=CCPR%2FC%2FRUS%2FCO%2F7&Lang=en](https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=CCPR%2FC%2FRUS%2FCO%2F7&Lang=en)

### COMMITTEE ON ECONOMIC, SOCIAL AND CULTURAL RIGHTS

1. Concluding observations on the third periodic report of Uzbekistan. Committee on Economic, Social and Cultural Rights. E/C.12/UZB/CO/3. 31 March 2022. Paras 52-53.

[https://tbinternet.ohchr.org/\\_layouts/15/treatybodyexternal/Download.aspx?symbolno=E%2fC.12%2fUZB%2fCO%2f3&Lang=en](https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=E%2fC.12%2fUZB%2fCO%2f3&Lang=en)



2. Concluding observations on the seventh periodic report of Belarus. Committee on Economic, Social and Cultural Rights. E/C.12/BLR/CO/7. 24 March 2022. Paras 37-38.

[https://tbinternet.ohchr.org/\\_layouts/15/treatybodyexternal/Download.aspx?symbolno=E%2fC.12%2fBLR%2fCO%2f7&Lang=en](https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=E%2fC.12%2fBLR%2fCO%2f7&Lang=en)

3. Concluding observations on the seventh periodic report of Ukraine. Committee on Economic, Social and Cultural Rights. E/C.12/UKR/CO/7. 2 April 2020. Paras 42-43.

[https://tbinternet.ohchr.org/\\_layouts/15/treatybodyexternal/Download.aspx?symbolno=E%2fC.12%2fUKR%2fCO%2f7&Lang=en](https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=E%2fC.12%2fUKR%2fCO%2f7&Lang=en)

4. Concluding observations on the third periodic report of Estonia. Committee on Economic, Social and Cultural Rights. E/C.12/EST/CO/3. 27 March 2019. Paras 44-45.

[https://tbinternet.ohchr.org/\\_layouts/15/treatybodyexternal/Download.aspx?symbolno=E%2fC.12%2fEST%2fCO%2f3&Lang=en](https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=E%2fC.12%2fEST%2fCO%2f3&Lang=en)

5. Concluding observations on the second periodic report of Kazakhstan. Committee on Economic, Social and Cultural Rights. E/C.12/KAZ/CO/2. 29 March 2019. Paras 46-47.

[https://tbinternet.ohchr.org/\\_layouts/15/treatybodyexternal/Download.aspx?symbolno=E%2fC.12%2fKAZ%2fCO%2f2&Lang=en](https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=E%2fC.12%2fKAZ%2fCO%2f2&Lang=en)

6. Concluding observations on the sixth periodic report of the Russian Federation. Committee on Economic, Social and Cultural Rights. E/C.12/RUS/CO/6. 16 October 2017. Paras 51-51.

[https://tbinternet.ohchr.org/\\_layouts/15/treatybodyexternal/Download.aspx?symbolno=E%2fC.12%2fRUS%2fCO%2f6&Lang=en](https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=E%2fC.12%2fRUS%2fCO%2f6&Lang=en)



7. Concluding observations on the combined second and third periodic reports of Kyrgyzstan. Committee on Economic, Social and Cultural Rights. 7 July 2015. Para 23.

[https://tbinternet.ohchr.org/\\_layouts/15/treatybodyexternal/Download.aspx?symbolno=E%2fC.12%2fKGZ%2fCO%2f2-3&Lang=en](https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=E%2fC.12%2fKGZ%2fCO%2f2-3&Lang=en)

8. Concluding observations on the combined second and third periodic reports of Tajikistan. Committee on Economic, Social and Cultural Rights. E/C.12/TJK/CO/2-3. 25 March 2015. Paras 32-33.

[https://tbinternet.ohchr.org/\\_layouts/15/treatybodyexternal/Download.aspx?symbolno=E%2fC.12%2fTJK%2fCO%2f2-3&Lang=en](https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=E%2fC.12%2fTJK%2fCO%2f2-3&Lang=en)

9. Committee on Economic, Social and Cultural Rights Concluding observations on the sixth periodic report of Ukraine. E/C.12/UKR/CO/6. 13 June 2014. Para 24.

[https://tbinternet.ohchr.org/\\_layouts/15/treatybodyexternal/Download.aspx?symbolno=E%2fC.12%2fUKR%2fCO%2f6&Lang=en](https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=E%2fC.12%2fUKR%2fCO%2f6&Lang=en)

10. Concluding observations of the Committee on Economic, Social and Cultural Rights. Russian Federation. E/C.12/RUS/CO/5. 1 June 2011. Para 29.

[https://tbinternet.ohchr.org/\\_layouts/15/treatybodyexternal/Download.aspx?symbolno=E%2fC.12%2fRUS%2fCO%2f5&Lang=en](https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=E%2fC.12%2fRUS%2fCO%2f5&Lang=en)

11. Concluding observations of the Committee on Economic, Social and Cultural Rights. Ukraine. E/C.12/UKR/CO/5. 4 January 2008. Paras 28,51.

[https://tbinternet.ohchr.org/\\_layouts/15/treatybodyexternal/Download.aspx?symbolno=E%2fC.12%2fUKR%2fCO%2f5&Lang=en](https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=E%2fC.12%2fUKR%2fCO%2f5&Lang=en)



## COMMITTEE AGAINST TORTURE

1. Concluding observations on the sixth periodic report of the Russian Federation. Committee against Torture. CAT/C/RUS/CO/6. 28 August 2018. Paras 20-21.

[https://tbinternet.ohchr.org/Treaties/CAT/Shared%20Documents/RUS/CAT\\_C\\_RUS\\_CO\\_6\\_32062\\_E.pdf](https://tbinternet.ohchr.org/Treaties/CAT/Shared%20Documents/RUS/CAT_C_RUS_CO_6_32062_E.pdf)

## COMMITTEE ON THE RIGHTS OF PERSONS WITH DISABILITIES

1. Concluding observations on the initial report of the Russian Federation. Committee on the Rights of Persons with Disabilities. CRPD/C/RUS/CO/1. 9 April 2018. Paras: 51-52.

[https://tbinternet.ohchr.org/\\_layouts/15/treatybodyexternal/Download.aspx?symbolno=CRPD%2fC%2fRUS%2fCO%2f1&Lang=en](https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=CRPD%2fC%2fRUS%2fCO%2f1&Lang=en)

## COMMITTEE ON THE RIGHTS OF THE CHILD

1. Consideration of reports submitted by States parties under Article 44 of the Convention Concluding observations: Ukraine. Committee on the Rights of the Child. CRC/C/UKR/CO/3-4. 21 April 2011. Paras 60-63.

<https://digitallibrary.un.org/record/702364?ln=en>

## COMMITTEE ON THE ELIMINATION OF DISCRIMINATION AGAINST WOMEN

1. Concluding observations on the fifth periodic report of Kyrgyzstan. Committee on the Elimination of Discrimination against Women. CEDAW/C/KGZ/CO/5. 21 November 2021. Paras 45-46.

[https://tbinternet.ohchr.org/\\_layouts/15/treatybodyexternal/Download.aspx?symbolno=CEDAW%2fC%2fKGZ%2fCO%2f5&Lang=en](https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=CEDAW%2fC%2fKGZ%2fCO%2f5&Lang=en)



2. Concluding observations on the ninth periodic report of the Russian Federation. Committee on the Elimination of Discrimination against Women. CEDAW/C/RUS/CO/9. 30 November 2021. Paras 40-41.

[https://tbinternet.ohchr.org/\\_layouts/15/treatybodyexternal/Download.aspx?symbolno=CEDAW%2fC%2fRUS%2fCO%2f9&Lang=en](https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=CEDAW%2fC%2fRUS%2fCO%2f9&Lang=en)

3. Concluding observations on the eighth periodic report of the Russian Federation. Committee on the Elimination of Discrimination against Women. CEDAW/C/RUS/CO/8. 20 November 2015. Paras 35-36.

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