

Shadow Report to the UN Human Rights Committee in relation to the review of the 7th Periodic Report of the Russian Federation (CCPR/C/RUS/7).

This report is drafted by the Andrey Rylkov Foundation for Social Justice and Health, Moscow and the Canadian HIV/AIDS Legal Network, Toronto*.

Person to contact: Anya Sarang, Moscow. Email: anyasarang@gmail.com

1. Introduction and summary

1.1 The underlying drug policy document of the Russian Federation — the Strategy of State Drug Policy until 2020, which was approved by Decree of the President — makes zero mention of human rights.¹ Aimed at punishing people for using drugs and coercing people into abstinence, Russia's official drug policy disregards the health nature of drug dependence.

1.2 The drug policies of the Russian Federation systematically violate many of the rights and freedoms of people who use drugs as enumerated in the International Covenant on Civil and Political Rights (ICCPR), including: freedom from discrimination; the right to life; freedom from torture and cruel, inhuman and degrading treatment; the right to liberty and security of person; humane treatment of persons deprived of liberty; the right to equality before courts and tribunals and to a fair trial; freedom of expression including the right to freedom of information. These violations stem primarily from the government's use of punitive approaches, based on absolutely no scientific evidence, to address what the international community classifies as a health problem, namely drug dependence, a condition with globally sanctioned and effective evidence- and human rights-based responses.

2. Recommendations to the government

- The government of the Russian Federation should develop and adopt a human rights-based federal law regulating drug-demand reduction and drug-related harm reduction through social and medical measures, rather than through law enforcement.
- These measures should take into account the special vulnerability of people who use drugs, especially drug-dependent people, to discrimination, ill treatment and other human rights violations, and ensure that evidence-based drug-dependence treatment, such as opioid substitution therapy, is available to all in need, particularly in places of detention.

*Information about these organizations is in Annex I

¹ Strategy for the Implementation of the National Anti-Drug Policy of the Russian Federation in the Period Until 2020, adopted by Presidential Order N 690 of 9 June 2010. («Стратегия государственной антинаркотической политики Российской Федерации до 2020 года». Утверждена Указом Президента № 690 от 9 июня 2010 года.)

- Custodial punishment for drug crimes should not be applicable to drug use and related actions, including the purchase and possession of drugs, where there is no intent to supply.²
- International standards of fair trial shall be strictly observed, including on drug cases. In particular law enforcement agencies and courts shall receive clear guidelines how to avoid evidences which have been received as a result of ill-treatment of people who used drugs, police provocation, or when purity of street drugs is not established. The use of independent forensic and scientific research in drug cases should be promoted, not discouraged.
- Information related to health, human rights or other issues of drug policy must be freely available and unrestricted.
- In order to enable more effective implementation of Art 2.2 of ICCPR the Government of the Russian Federation shall amend procedural laws to provide for reconsideration of legal cases if the UN Human Rights Bodies, including Special Procedures which observe adversarial rules when review individual complaints (for example the UN Working Group on Arbitrary Detention), find human rights violations.

3. A brief description of drug use and relevant drug laws in Russia

3.1 Drug use in Russia is an administrative offence punishable by up to 15 days in detention.³ Drug possession without intent to supply, in amounts exceeding 0.5 but not exceeding 2.5 grams for heroin or opium, is considered a crime and is punishable by incarceration for up to 3 years; and if the amount exceeds 2.5 grams, from 3 to 10 years of incarceration.⁴

3.2 Russia is now second only to the United States in rates of incarceration per 100,000 residents.⁵ Every fifth inmate is in prison for drug crime. Up to two-thirds of all people who use drugs (PWUD) have been in custody at least once in their life.⁶ By estimates, nearly 5 million people in Russia currently use illegal drugs,⁷ 1.7 million of whom use opiates such as heroin.⁸ At the end of 2012, approximately 533,000 people were registered as drug users, of whom about 68% were considered injecting drug users. Of those diagnosed with drug dependence, 84% were dependent on opioids.⁹ In 2010, 7192 people died because of overdoses.¹⁰

² Report presented by Anand Grover, Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of health, in 2010 in accordance with Resolution 6/29 of the Human Rights Council; Vienna Declaration, 2010; *Report of the Global Commission on Drug Policy*, June 2011.

³ Article 6.9. of the Russian Federation Code on Administrative Offences, 2001. (Статья 6.9 Кодекса Российской Федерации Об административных правонарушениях, 2001 года.)

⁴ Article 228 of the Criminal Code of the Russian Federation, 1996. (Статья 228 Уголовного Кодекса Российской Федерации, 1996 года.)

⁵ R. Walmsley, *World Prison Population List*, 8th ed., International Centre for Prison Studies, 2009.

⁶ A. Sarang, et al., “Drug injecting and syringe use in the HIV risk environment of Russian penitentiary institutions,” *Addiction* 2006, 101:1787–1796.

⁷ Interview with head of the Federal Drug Control Agency (February 4, 2010), *Rossiyskaya Gazeta*, Federal issue No. 5101 (22).

⁸ UN Office on Drugs and Crime, *World Drug Report* (Vienna: 2011).

⁹ V. Kirzhanova, et al., “Incidence of substance abuse disorders, registered in the Russian Federation. Key performance indicators of the drug treatment (narcology) service in 2011-2012,” National Addiction Research Center (Moscow:

3.3 While the UN Office on Drugs and Crime (UNODC), the World Health Organization (WHO) and the Russian Ministry of Health all recognize drug dependence as a chronic health condition, they differ substantially in their approaches to treatment. The UN General Assembly, WHO, and UNODC have all recommended opioid substitution therapy (OST) with methadone and buprenorphine as the most effective method of opioid dependence treatment¹¹, which has been successfully implemented in over 70 countries. However, this internationally recognized treatment is banned by law in Russia.¹² Instead, drug dependence is treated through moral admonishment and incarceration, methods devoid of scientific backing or evidence.

4. Assessment of facts in light of the relevant provisions in the ICCPR

4.1. Articles 2(1) and 26 — non-discrimination; Article 2(2) – implementation on the domestic level

4.1.1 In its official drug policy document, the Russian government has indicated the need to build intolerance towards drug use and users.¹³ State authorities choose increasing “social pressure”, including imprisonment, on drug users as an appropriate method of preventing and combating drug dependence.¹⁴

4.1.2 In this highly repressive and stigmatized environment, Russian law enforcement has virtual carte blanche to discriminate against people who used drugs.¹⁵

4.1.3 According to Art 2 of ICCPR, State Parties shall undertake all necessary steps to adopt such laws or other measures as may be necessary to give effect to the rights recognized in ICCPR. Human Rights Committee considers that this obligation includes the need to change laws and legal practices to meet the standards imposed by the Covenant’s substantive guarantees¹⁶. Observations/views and other decisions of the UN Human Rights bodies which were established in particular to monitor the states’

2013). (The number of narcological Kirжанова В. и др. (2013). «Число заболеваний наркологическими расстройствами, зарегистрированных в Российской Федерации». Основные показатели деятельности наркологической службы в 2011-2012 году. Национальный научный центр наркологии. Москва).

¹⁰ Aleksandra Zinovieva, “Hospital or Prison?,” July 21 2011, Multiportal KM.RU.

¹¹ Political Declaration (para. 20) and Plan of Action on International Cooperation towards an Integrated and Balanced Strategy to Counter the World Drug Problem, adopted by the High Level Segment of the Commission on Narcotic Drugs, March 2009 and later adopted by the UN General Assembly’s Resolution 64/182 of 18 December 2009.

¹² Article 31 of the Federal Law of 08.01.1998 N 3-FZ, “On Narcotic Drugs and Psychotropic Substances Act” (Статья 31 Федерального Закона от 08.01.1998 N 3-ФЗ “О наркотических средствах и психотропных веществах”) prohibits the use of narcotic drugs and psychotropic substances, such as methadone and buprenorphine for the treatment of drug addiction.

¹³ Strategy for the Implementation of the National Anti-Drug Policy of the Russian Federation in the Period Until 2020, adopted by Presidential Order N 690 of 9 June 2010, para. 23 and 48. («Стратегия государственной антинаркотической политики Российской Федерации до 2020 года» (Параграф 23 и 48). Утверждена Указом Президента № 690 от 9 июня 2010 года.).

¹⁴ A. Kurskaya, “Public pressing against drug dependence,” RIA Novosti, 16 May 2011. (Курская А.(16 мая 2011). «Социальный прессинг против наркомании». РИА Новости.)

¹⁵ A. Sarang et al., “Policing Drug Users in Russia: Risk, Fear, and Structural Violence,” *Substance Use & Misuse* 2010, 45:813-864.

¹⁶ General comment No. 31: The Nature of the General Legal Obligation Imposed on States Parties to the Covenant (2004), para. 13.

compliance with international human rights treaties, including ICCPR, are important instruments to help states to identify human rights violations and provide remedies. For this reasons Art 2 of ICCPR along with Art 27 of 1969 Vienna Convention oblige State Parties to give strong considerations to observations/views and other decisions of the UN Human Rights Bodies which are mandated to consider individual complaints concerning violations of the rights guaranteed by ICCPR.

4.1.4 Unfortunately no UN Human Rights body is mentioned in Russian laws as an international authority whose judgments/views/decisions can trigger reconsideration of cases on the national level.

4.1.5 In May 2013 the UN Working Group on Arbitrary Detention (UNWG) adopted an Opinion on the case of Denis Matveev – a typical drug case from Russia¹⁷. The UNWG stated that Russian authorities, including courts violated articles 14(1), 18(1) and 19(2) of ICCPR when they considered criminal case against Denis Matveev. Matveev’s lawyer transmitted the Opinion to the Supreme Court of the Russian Federation requesting the Court to reconsider the case of Matveev, taking into account finding of the UNWG. In particular the lawyer relied upon Art 413 of the Criminal Procedural Code of the Russian Federation which stipulates that judgments of the European Court of Human Rights shall be considered as sufficient reasons for the Supreme Court to trigger reconsideration of a case. In his submission the lawyer claimed that the legal nature of judgments of the European Court of Human Rights and the UNWG is very similar as was confirmed by the European Court of Human Rights in *Peraldi v France*¹⁸. However on March 27, 2014 the Supreme Court rejected the application stating that Russian laws do not mention Opinions of the UNWG as possible ground to trigger reconsideration of case. Such a decision of the Supreme Court demonstrates that Russian authorities shall enhance their laws and practices in order to give stronger considerations to decisions of the UN Human Rights Bodies which clearly identify violations of ICCPR, including by way of reconsiderations of cases in line with recommendations of the UN Human Rights Bodies.

4.2. Article 7 — Freedom from torture or cruel, inhuman or degrading treatment or punishment

4.2.1 The Human Rights Committee as well as the UN Committee Against Torture have already voiced their concerns regarding the use of torture and other cruel, inhuman or degrading treatment of persons in police custody, pre-trial detention and prison in Russia.^{19,20} Testimonial evidence demonstrate that people who use drugs, in particular

¹⁷ Opinion Adopted by the Working Group on Arbitrary Detention at its 66 Session, 29 April – 3 May, 2013, No 8/2013. <http://en.rylkov-fond.org/wp-content/uploads/2013/08/Opinion-8-2013-transmission-to-source-29.07.2013-1.pdf>

¹⁸ *Peraldi v France* (ECHR), Application 2096/05, Decision of April 7, 2009.

¹⁹ Human Rights Committee, “Concluding Observations from the Human Rights Committee: Russian Federation,” 6 November 2003, para. 12; Human Rights Committee, “Concluding Observations from the Human Rights Committee: Russian Federation,” 24 November 2009, para. 15.

²⁰ Committee against Torture, “Conclusions and Recommendations from Review of reports presented by member states in accordance with Article 19 of the Convention against Torture — The Russian Federation,” 6 February 2007. CAT/C/RUS/CO/4 (Para. 9a)

drug-dependent people, are especially vulnerable to torture and other forms of ill-treatment while in the custody of law enforcement.²¹

4.2.2 A common form of such treatment is the intentional, discriminatory denial of drug-dependence treatment for drug-dependent people who are in police custody. These strategic denials are devised as a means of coercing drug dependent people into self-incrimination or confession as a result of severe physical and mental pain due to opioid withdrawal.²² According to the UN Special Rapporteur on Torture, “There is no doubt that the withdrawal syndrome can cause severe pain and suffering if medical assistance is not provided accordingly, and that the condition of withdrawal in prisoners creates a strong potential for mistreatment.”²³ The WHO indicates that the symptoms of opiate withdrawal syndrome include, among other things, severe diarrhea, vomiting and anxiety.²⁴ In some cases, police officers have used these symptoms to humiliate and torture drug-dependent people by preventing them from accessing toilets or other facilities and shaming them into confessions.²⁵ Such abusive treatment of persons in need of medical treatment amounts to torture. The Special Rapporteur on Torture has also indicated that, “if withdrawal symptoms are used for any of the purposes cited in [the] definition of torture enshrined in article 1 of CAT, this might amount to torture.”²⁶

4.2.3 As indicated in para 3.3 of this report, Russian authorities enforce a blanket legal ban on one of the most effective opioid dependence treatments — opioid substitution therapy. According to the UN Special Rapporteur on Torture, “A particular form of ill-treatment and possibly torture of drug users is the denial of opiate substitution treatment, including as a way of eliciting criminal confessions through inducing painful withdrawal symptoms (A/HRC/10/44 and Corr.1, para. 57). The denial of methadone treatment in custodial settings has been declared to be a violation of the right to be free from torture and ill-treatment in certain circumstances (ibid., para. 71). Similar reasoning should apply to the non-custodial context, particularly in instances where Governments impose a complete ban on substitution treatment and harm reduction measures.”²⁷

4.2.4 The Special Rapporteur further asserts that, “[b]y denying effective drug treatment, State drug policies intentionally subject a large group of people to severe physical pain, suffering and humiliation, effectively punishing them for using drugs and trying to coerce

²¹ A. Sarang et al., “Policing Drug Users in Russia: Risk, Fear, and Structural Violence,” *Substance Use & Misuse* 2010, 45:813-864.

²² Application of Ivan Ahoshkin to the European Court of Human Rights, June 8, 2013. <http://rylkov-fond.org/blog/advocacy/strat-cases/echr/>

²³ Report of the Special Rapporteur on torture and other cruel, inhuman or degrading treatment or punishment, Manfred Nowak, 14 January 2009, A/HRC/10/44, para. 57.

²⁴ World Health Organization, *Guidelines for the Psychosocially Assisted Pharmacological Treatment of Opioid Dependence* (2009).

²⁵ Ahoshkin. Supra note 22.

²⁶ Special Rapporteur on torture and other cruel, inhuman or degrading treatment or punishment, *Promotion and Protection of All Human Rights, Civil, Political, Economic, Social and Cultural Rights, Including the Right to Development*, U.N. Doc. A/HRC/10/44 (Jan. 14, 2009) (by Manfred Nowak).

²⁷ Special Rapporteur on torture and other cruel, inhuman or degrading treatment or punishment, *Applying the torture and ill-treatment protection framework in health-care settings*, A/HRC/22/53. Feb 1, 2013, para 73.

them into abstinence, in complete disregard of the chronic nature of dependency and of the scientific evidence pointing to the ineffectiveness of punitive measures.”²⁸

4.2.5 In March–April 2014, Russian authorities intentionally blocked the supply of opioid substitution medications to Crimea after the Russian Federation took control of the region on March 20, 2014. As the result, 803 patients of opioid substitution therapy (which was legal in Crimea when it was part of Ukraine) were put into sudden withdrawal and at further risk of using illicit drugs and all the attendant adverse health consequences.²⁹ Some of this patients have been already prosecuted for using narcotic drugs³⁰.

4.3. Article 9 — Right to liberty and security of person

4.3.1 The Human Rights Committee has stated that the concept of arbitrary detention is not limited by cases when arrest or detention it was against the law; rather, the justification for a detention must be much broader and include elements of appropriateness, justice, due process and predictability in order to avoid the charge of arbitrariness.³¹ The prohibition against arbitrariness furthermore stipulates that the underlying rationale for detention cannot be discrimination.

4.3.2 Law enforcement officers in Russia often use unreasonable causes as justification for the search and detention of people who use drugs: young age, looking like a “junkie”, association with drug users, needle marks on one’s arm.³² Police have also been known to use medical data on people who have been diagnosed as drug dependent, in order to arrest them.³³ In other words, drug users are discriminatorily singled out by law enforcement simply because they are drug users.

4.3.3 A typical arrest “procedure” may involve police officers encountering someone on the street whom they believe to be a drug user because of where the person is located or needle marks on the person’s arms, or because the person’s name appears in medical files related to drug dependency. After the subject is brought into custody, drugs are planted on their person to make the case.³⁴

²⁸ Ibid, para 74.

²⁹ During his first official statement on Crimea on April 2, 2014 the Director of the Russian Federal Drug Control Service insisted that opioid substitution therapy shall be closed.

http://fskn.gov.ru/includes/periodics/speeches_fskn/2014/0402/104829810/detail.shtml

³⁰ Communication of Mikhail Golichenko, Canadian HIV/AIDS Legal Network with Igor Kouzmenko, a patient of opioid substitution therapy in the city of Simferopol, Crimea.

³¹ *Fongum Gorji-Dinka v. Cameroon*, Communication No. 1134/2002, U.N. Doc. CCPR/C/83/D/1134/2002 (2005), para. 5.1.

³² *Atmospheric Pressure: Russian Drug Policy as a Driver for Violations of the UN Convention Against Torture*.

Andrey Rylkov Foundation, Canadian HIV/AIDS Legal Network. (2011) pp. 8 – 16.

<http://www.aidslaw.ca/publications/interfaces/downloadFile.php?ref=1949>

³³ Levinson L., Torban M., *Drug Registry: As per the law or as per an instruction? Regulation of registration of people who use drugs in the Russian Federation*. Human Rights Institute. 2009. Pp 20-21 (Левинсон Л., Торбан М.

Наркоучет: по закону или по инструкции? Регулирование регистрации потребителей наркотиков в Российской Федерации. Институт прав человека. 2009. С 20-21).

³⁴ Anoshkin, supra note 22.

4.4. Article 10 — Humane treatment of persons deprived of liberty

4.4.1 Russia does not acknowledge the legitimacy of internationally recognized forms of medical and pharmacological drug-dependence treatments such as OST, and has banned such treatment.³⁵ As a result, no evidence-based drug-treatment services are available in pre-trial detention or in any custodial facilities. Instead, drug dependence is treated with “treatments” such as beatings, humiliation and “character-building” exercises, which are supported by no scientific evidence to demonstrate their effectiveness.

4.4.2 Among vulnerable and overcrowded prison populations, HIV-prevalence and the spread of other infectious diseases, such as tuberculosis and hepatitis C, are many times higher than in general populations.³⁶

4.4.3 From a human rights standpoint, those detainees and prisoners whose health has been weakened through the use of illegal drugs, HIV and other infectious diseases, require special attention. But the prison health-care system denies them such attention, and instead inmates’ requests for medical assistance have led to violence against them by penitentiary administrations.³⁷ These prisoners’ requests for medical attention are met with beatings or even more egregious treatment.³⁸

4.4.4 The denial of medical treatment for PWUD is not limited only to those health conditions resulting from drug use; as long as the individual suffering is a PWUD, often any kind of health care are denied. For example, while in pre-trial detention, some PWUD have been denied necessary medical services for pre-existing conditions, such as congenital physical disabilities, resulting in otherwise easily avoidable severe pain and suffering.³⁹

4.5. Article 14 — Right to equality before courts and tribunals and right to a fair trial

4.5.1 Regarding criminal cases against people who use drugs in Russia, authorities are rejecting many procedures and standards under Article 14 of the ICCPR.

4.5.2 The independence of the Russian judicial system is highly suspect and often open to the exercise of political influence in its operation.⁴⁰ The frequency of acquittals in drug-related cases is lower than 1%.⁴¹

³⁵ Narcotics Drugs and Psychotropic Substances Act [N 3-FZ] art. 31 (Russ.).

³⁶ Human Rights Watch, *Lessons not learned: human rights abuses and HIV/AIDS in the Russian Federation* (2004).

³⁷ Andrey Rylkov Foundation, “Provision of Medical Assistance in the Penitentiary System,” interviews, 2010. (Фонд им. Андрея Рылкова (2010). «Оказание медицинской помощи в МЛС [местах лишения свободы]. Интервью.» <http://rylkov-fond.org/blog/lichnye-svidetelstva/ustinov/>

³⁸ Ibid.

³⁹ Human Rights Watch, “Russia: Woman in Dire Health is Freed,” April 5, 2013. Available at <http://www.hrw.org/news/2013/04/05/russia-woman-dire-health-freed>

⁴⁰ Report of the Special Rapporteur on the independence of judges and lawyers, Leandro Despouy, based on his Mission to the Russian Federation in 2008 (A/HRC/11/41/Add.2, 23 March 2009), para. 58.

⁴¹ Ibid., para. 37.

4.5.3 The scale of drug-related offences in Russia is large,⁴² with more than 75% of drug cases directly related to drug use, not supply. Two thirds of these cases are reviewed in the absence of a court trial, with the defendants pleading guilty to the alleged crimes.⁴³

4.5.4 When sentencing drug users, courts often ignore the legality of a case or procedural errors made at the time of detention or investigation, which as this report has noted, are often suspect and unreliable.⁴⁴ When making their decisions, courts disregard police provocation (police entrapment), which occurs with great frequency in drug cases.⁴⁵

4.5.5 Police do not establish, nor do prosecutors or judicial officials consider, the purity of the narcotic mixtures (street drugs). Drugs possession without intent to supply, in amounts exceeding 2.5 grams for heroin for instance, is punishable by incarceration for up to 10 years (Article 228(2) of the Criminal Code of the Russian Federation). The purity of street drugs, especially heroin, is very weak, often not exceeding 1%. Because of their high tolerance to opioids, people living with drug dependence have to purchase larger amounts of street drugs, thus exposing them to tougher penalties — up to 10 years or even more. When purity is not taken into account, criminal justice subject people with drug dependence to a stricter standard and in fact punishes them for their dependence, clearly violating fundamental notions of fairness and potentially amounting to an arbitrary deprivation of liberty stemming from disproportionality and discrimination.

4.5.6 It is a fundamental aspect of the right to a fair trial that criminal proceedings should be adversarial and that there should be equality of arms between the prosecution and defence.⁴⁶ This shall include the right of defence to present independent forensic and other expert reports, especially on drug cases, where forensic reports play key role in establishing what type of substance was allegedly in possession of an accused. However, Russian courts often deny that the defence has such a right and refuse to accept results of independent forensic and other scientific examinations⁴⁷. Moreover in some cases drug

⁴² Recent documentation has found that “one in every eight inmates in Russia has been punished for drug-related crimes; the number of drug users in the penitentiary system grew twice in the period of 2005 to 2011; one in every three court sentences in the largest cities is related to drug crimes; within the total number of terminated offences, drug-related crimes are the third largest group after theft and economic offences.” See Session of the Presidium of the State Council dedicated to the fight against drugs among young people, April 18, 2011. (Заседание президиума Госсовета, посвящённое борьбе с распространением наркотиков среди молодёжи. 18 апреля 2011 года.)

<http://президент.рф/news/10986>

⁴³ Analysis of statistics from the Section on court statistics on the website of the Department of Courts. (Раздел судебная статистика на сайте Судебного Департамента.) www.cdep.ru

⁴⁴ Interregional public charity organization “Committee for Civil Rights,” *Main systematic violations of human rights by FSKN*. («Основные нарушения прав человека, систематически допускаемые ФСКН» (2009).

Межрегиональная общественная благотворительная правозащитная организация «Комитет за гражданские права». Доклад.) <http://www.zagr.org/371.html>

⁴⁵ *Vanyan v. Russia*, ECHR (15.12.2005); *Khudobin v. the Russian Federation*, ECHR (26.10.2006); *Bannikova v Russian Federation* (4.11.2011); *Veselov and others v Russia* (2.10.2012).

⁴⁶ *Rowe and Davis v. The UK* (ECHR), No 28901/95, Judgment 16.02.2000, § 60 Reports of Judgments and Decisions 2000-II

⁴⁷ Application to the European Court of Human Rights on the case of *Konyshev v Russia*, December 14, 2012.

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enforcement prosecute scientists, who make independent scientific statements on criminal cases at the request of defence, for adding and abetting drug crimes⁴⁸.

4.6. Article 19.2 — Freedom of expression and right to access to information

4.6.1 Anti-drug propaganda law provides for so broad a definition of drug propaganda that anything containing the words “heroin” or “methadone” can fall within its scope.⁴⁹ The Federal Drug Control Service has long been known to use this law to suppress human rights and health information⁵⁰.

4.6.2 Scientific and other public discussions regarding OST are suppressed in Russia under threat of prosecution.⁵¹ In 2012, the Federal Drug Control Service shut down the website of a non-governmental organization for disseminating the recommendation concerning OST that had been delivered to the Russian government by the UN Committee on Economic, Social and Cultural Rights.⁵²

4.6.3 The government similarly opposes as drug propaganda all evidence-based harm reduction programs, such as needle and syringe programs, and overdose prevention programs, which are aimed at maintaining the health of drug users, and preventing the transmission of infectious diseases and overdose-related deaths. Such programs are classified as drug propaganda at the policy level, in violation of Article 46 of the Federal Law on narcotic drugs and psychotropic substances.⁵³

4.6.4 By suppressing the dissemination of information regarding drug-dependence treatment, HIV, and overdose-prevention methods, Russian officials infringe upon the freedom of expression of those seeking to disseminate such information, as well as the right of individuals who seek to access such information.

4.6.5 Perhaps even more problematically, the government uses its information monopoly to actively spread falsehoods regarding OST.⁵⁴ This double-manoeuvre carries a

⁴⁸ Outcry over jailed Russian chemist: Narcotics expert Olga Zelenina falsely accused of aiding drug trafficking, say supporters. 21 September 2012. International Journal Nature. <http://www.nature.com/news/outcry-over-jailed-russian-chemist-1.11462>

⁴⁹ Article 46 of the Federal Law No 3-FZ of Jan 8, 1998 “On narcotic drugs and psychotropic substances”.

⁵⁰ Communication to the United Nations Educational, Scientific and Cultural Organization (UNESCO) regarding violation by the Government of the Russian Federation of the right to enjoy the benefits of scientific progress and its applications. March 2012. http://www.aidslaw.ca/newsite/wp-content/uploads/2013/04/ARF_UNESCO2April2012.pdf

⁵¹ T. Parfitt, “Vladimir Mendeleevich: fighting for drug substitution treatment,” *The Lancet* 2006, Volume 368, Issue 9532, p. 279.

⁵² Communication to the United Nations Educational, Scientific and Cultural Organization (UNESCO) regarding violation by the Government of the Russian Federation of the right to enjoy the benefits of scientific progress and its applications. March 2012. http://www.aidslaw.ca/newsite/wp-content/uploads/2013/04/ARF_UNESCO2April2012.pdf

⁵³ Strategy for the Implementation of the National Anti-Drug Policy of the Russian Federation in the Period Until 2020, adopted by Presidential Order N 690 of 9 June 2010, para. 48. («Стратегия государственной антинаркотической политики Российской Федерации до 2020 года» (Параграф 48). Утверждена Указом Президента № 690 от 9 июня 2010 года.)

⁵⁴ Mikhail Golichenko and Tatyana Margolin, “Right to Know: True or False?,” *INTERRIGHTS Bulletin*, Vol. 17, No. 3 (2013), pp. 138 – 142.

substantial chilling effect for any groups or individuals who seek to provide objective information regarding evidence-based drug-dependence treatment methods.⁵⁵

5. Conclusion

5.1 The Russian government has developed and codified into law a drug policy that systematically and comprehensively violates the human rights of people who use drugs, especially drug-dependent people. This policy must be revised in line with human rights standards to address these individuals' special vulnerability to human rights violations.

Annex I



Andrey Rylkov Foundation for Health and Social Justice (www.rylkov-fond.org) is a grass-roots organization from Moscow, Russia with the mission to promote and develop humane drug policy based on tolerance, protection of health, dignity and human rights. The Foundation engages in 4 key strategies to advance its mission: advocacy, watchdog, service provision and capacity building of affected communities and individuals.

Address: 17-82 Marshala Biryzova street, Moscow, Russia, 123060



The Canadian HIV/AIDS Legal Network (www.aidslaw.ca) promotes the human rights of people living with and vulnerable to HIV/AIDS, in Canada and internationally, through research and analysis, advocacy and litigation, public education and community mobilization. The Legal Network is Canada's leading advocacy organization working on the legal and human rights issues raised by HIV/AIDS. (An NGO with Special Consultative Status with the Economic and Social Council of the United Nations)

*Address: 1240 Bay street, Suite 600, Toronto, Ontario, Canada, M5R 2A7
Tel: 1(416)595 1666; Fax: 1 (416) 595 0094*

⁵⁵ Ibid., p. 141.