

The Sovereign Nations' Declaration on Drug Policy Reform and Global Cooperation

Toward a Paradigm of Peace, Health, and Human Dignity

A Proposal by

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Preamble

We, the undersigned High Contracting Parties, representing sovereign nations and their peoples,

- **Recognizing** the profound and multifaceted negative consequences of the international “War on Drugs,” including its devastating impact on human lives, societal well-being, economic development, and global stability;
- **Acknowledging** that decades of prohibitionist policies have demonstrably failed to achieve their stated objectives of reducing drug supply or demand, and have instead exacerbated harms;
- **Guided by** the fundamental principles of national sovereignty, self-determination, public health, universal human rights, peace, security, and sustainable development as enshrined in the Charter of the United Nations and other core international instruments;
- **Affirming** that drug policies must transition from a primary reliance on punitive prohibition towards evidence-informed, health-centered, and human-rights-based regulation and care;
- **Convinced** that a new international consensus is urgently required to address the complexities of drug use and its associated markets through approaches grounded in science, justice, compassion, and international cooperation respectful of diverse national contexts;

Hereby solemnly declare our collective commitment to ending the global “War on Drugs” and ushering in a new era of effective, humane, and sustainable drug policies.

1 Article I: Acknowledgment of Systemic Failure and Resultant Harms

1. **Declaration of Failure:** The global “War on Drugs,” pursued for over half a century, is hereby acknowledged as a systemic failure.
2. **Consequences of Prohibition:** Decades of primarily prohibitionist and punitive approaches have:

- Fueled unprecedented levels of mass incarceration globally, disproportionately affecting marginalized and vulnerable populations, including racial and ethnic minorities, Indigenous peoples, and economically disadvantaged communities.
 - Empowered and enriched transnational criminal organizations, leading to increased violence, corruption, and the erosion of the rule of law.
 - Destabilized entire regions, notably in parts of Latin America, Southeast Asia, and Africa, through militarized interventions, conflict over drug routes, and the subversion of democratic institutions.
 - Systematically undermined fundamental human rights, including the right to life, liberty, health, due process, and freedom from torture or cruel, inhuman, or degrading treatment or punishment.
 - Diverted vast public resources from essential services, such as public health, education, and sustainable development, towards costly and ineffective enforcement and militarization.
 - Generated significant environmental degradation associated with illicit cultivation and clandestine production.
 - Stigmatized and marginalized people who use drugs, creating barriers to accessing health and social services.
3. **Scientific and Expert Consensus:** We acknowledge the growing international consensus, supported by bodies such as the World Health Organization (WHO), the United Nations Office on Drugs and Crime (UNODC) in various reports, the Global Commission on Drug Policy, and numerous scientific and academic institutions, that problematic drug use is primarily a public health and social issue, and that punitive measures against individuals for personal use are often counterproductive and harmful.

2 Article II: Reaffirmation of National Sovereignty and Self-Determination in Drug Policy

1. **Sovereign Right to Legislate:** Each signatory nation possesses the inalienable sovereign right to formulate and implement drug policies, including the regulation, legalization, decriminalization, or prohibition of specific substances, in accordance with its own constitutional framework, legal traditions, cultural contexts, and public health and safety priorities.
2. **Cessation of Coercive Interventions:** International cooperation in drug control shall henceforth cease to involve coercion, explicit or implicit threats of sanctions,

withdrawal of aid, military intervention, or undue political or economic pressure to compel nations to adopt or maintain prohibitionist or punitive enforcement models against their sovereign will.

3. **Policy Diversity as a Strength:** The diversity of national drug policies, reflecting different societal values and responses to local conditions, is recognized as consistent with, and an expression of, the principle of self-determination of peoples, as enshrined in:

- The Charter of the United Nations (Article 1, Paragraph 2).
- The International Covenant on Civil and Political Rights (ICCPR, Article 1).
- The International Covenant on Economic, Social and Cultural Rights (ICESCR, Article 1).
- The United Nations Declaration on the Rights of Indigenous Peoples (Articles 3, 4, and 31, concerning self-determination and traditional medicines).

3 Article III: Reclassification of Substances and Reform of International Drug Control Conventions

1. **Call for Treaty Modernization:** Signatory nations commit to pursuing the modernization and reform of the existing international drug control treaty system, specifically:

- The 1961 Single Convention on Narcotic Drugs (as amended by the 1972 Protocol).
- The 1971 Convention on Psychotropic Substances.
- The 1988 United Nations Convention Against Illicit Traffic in Narcotic Drugs and Psychotropic Substances.

These reforms shall aim to remove mandates for universal criminalization of activities related to personal use, possession for personal use, and small-scale cultivation for personal or communal use, and to allow for legally regulated markets where deemed appropriate by sovereign states. This may be achieved through formal amendment processes, the development of *inter se* modification agreements, or coordinated reinterpretation guided by evolving human rights law and public health evidence.

2. **Reclassification Principle:** Substances currently scheduled under these conventions shall be subject to national re-evaluation, allowing for their classification primarily

as matters of public health, regulated commercial goods, traditional/ceremonial substances, or therapeutic agents, rather than solely as objects of international criminal control.

3. **Transnational Law Enforcement Cooperation:** International law enforcement cooperation (e.g., through INTERPOL, regional police organizations, or bilateral agreements such as those involving the U.S. Drug Enforcement Administration) shall respect the domestic laws of cooperating states. Operations targeting activities such as personal use, cultivation, possession, or commerce in substances that are legal or decriminalized under the national law of a sovereign state shall not be undertaken within that state's jurisdiction without its explicit, case-by-case consent, and shall not be grounds for punitive measures against that state.

4 Article IV: Adoption of Human Rights and Public Health Frameworks

1. **Prioritization of Public Health and Harm Reduction:** Signatory nations commit to reframing drug use primarily as a public health issue and shall endeavor to implement comprehensive, evidence-based strategies that prioritize:
 - **Harm Reduction:** Expansion of access to harm reduction services including, but not limited to, needle and syringe programs, opioid agonist therapies (e.g., methadone, buprenorphine), drug checking services, supervised consumption sites, and programs for the provision of a safe supply of regulated substances to reduce overdose deaths and other harms.
 - **Treatment and Support:** Provision of voluntary, evidence-based, and accessible treatment, recovery, and social reintegration services, free from coercion and respecting the dignity and autonomy of the individual.
 - **Decriminalization and De-stigmatization:** Elimination of criminal penalties and stigmatizing practices for personal drug use and possession for personal use, redirecting resources towards health and social support.
2. **Guiding Human Rights Principles:** All drug policies and their implementation shall be fully compliant with international human rights law, including but not limited to:
 - The Universal Declaration of Human Rights.
 - The International Covenant on Civil and Political Rights (ICCPR).

- The International Covenant on Economic, Social and Cultural Rights (ICESCR).
 - The Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment.
 - The Convention on the Elimination of All Forms of Discrimination against Women.
 - The Convention on the Rights of the Child.
 - The UN Standard Minimum Rules for the Treatment of Prisoners (the Nelson Mandela Rules).
 - The UN Guidelines on Alternative Development, promoting sustainable livelihoods for communities affected by illicit crop cultivation.
3. **Prohibition of Disproportionate Punishments:** No person shall be subjected to capital punishment, extrajudicial execution, torture, arbitrary detention, or other grossly disproportionate penalties solely for offenses related to non-violent personal drug use, possession for personal use, or small-scale, non-exploitative cultivation or trade. The specific threshold for “small-scale” shall be determined by national legislation, guided by principles of proportionality and human rights.

5 Article V: Pathways to Economic Transition, Reparative Justice, and Sustainable Development

1. **International Support for Transition:** International cooperation and financial mechanisms shall be reoriented to prioritize:
- **Sustainable Livelihoods:** Support for robust, participatory, and sustainable alternative development programs for farmers and communities historically dependent on the illicit cultivation of drug crops, ensuring genuine economic alternatives and food security.
 - **Development Assistance:** Provision of development aid, technical assistance, and capacity-building to countries and communities adversely affected by the violence, displacement, and socio-economic disruption caused by drug war militarization and eradication efforts.
 - **Reparative and Restorative Justice:** Implementation of policies and programs aimed at repairing harms experienced by individuals and communities disproportionately impacted by punitive drug laws and enforcement, including through record expungement, community reinvestment, and support for victims of drug war-related violence.

2. **Responsibility of Historically Enforcement-Oriented Nations:** Nations that have historically championed, funded, or exported punitive drug war policies are strongly encouraged to:

- Formally acknowledge the negative impacts of these past policies, both domestically and internationally.
- Provide substantial technical, financial, and legal support to other nations transitioning towards health-centered and human rights-based drug policy models.
- Contribute equitably to international funds dedicated to the objectives outlined in Article V.1.

6 Article VI: Framework for Global Drug Peace and Regulated Cooperation

1. **Mechanisms for Regulated International Cooperation:** Signatory nations may enter into bilateral or multilateral agreements to facilitate:

- **Ethical and Regulated Trade:** Development of frameworks for the ethical and regulated international trade of psychoactive substances for medicinal, scientific, therapeutic, ceremonial, or adult recreational purposes, subject to robust quality control, public health safeguards, and prevention of diversion to illicit markets.
- **Joint Scientific Research and Knowledge Exchange:** Collaboration on scientific research into psychoactive substances, their potential benefits and risks, and best practices in public health interventions, harm reduction, and regulatory science.
- **Coordinated Public Health Campaigns:** Joint development and implementation of evidence-based public education campaigns on drug use, focusing on health, safety, and informed decision-making.
- **Fair Regulation of Novel and Synthetic Substances:** Collaborative approaches to the assessment and regulation of novel psychoactive substances (NPS) and synthetic drugs, prioritizing public health and safety while avoiding overly broad prohibitions that drive markets underground.
- **Prevention of Corporate Capture and Monopolies:** Establishment of regulatory safeguards to prevent undue corporate influence, monopolistic practices, and aggressive marketing in any legally regulated markets for psychoactive substances, ensuring public health objectives remain paramount.

2. **Convening a Global Convention on Drug Policy Reform:** Signatory nations call for, and commit to participating in, a new Global Convention on Drug Policy Reform to be convened under the auspices of the United Nations or a coalition of willing sovereign states. This Convention will aim to negotiate and adopt a new generation of international legal instruments and cooperative frameworks grounded in:

- Respect for national sovereignty and diverse policy choices.
- Commitment to sustainable development goals.
- Protection of Indigenous and cultural rights related to traditional plants and practices.
- Upholding of scientific integrity and evidence-based policymaking.
- Ensuring equitable access and benefit-sharing.

Conclusion and Declaration of Intent

We, the High Contracting Parties signatory to this Declaration, hereby:

- **Declare** the formal commitment to transition away from the paradigm of the global “War on Drugs.”
- **Initiate** a new era characterized by international drug policies grounded in peace, regulation, public health, human rights, and respect for national sovereignty.
- **Pledge** our collective endeavor to ensure that psychoactive substances, and the policies designed to manage them, shall no longer serve as a pretext for international conflict, oppression, disproportionate punishment, or the denial of fundamental human dignities.

Adopted in the spirit of fostering global peace, advancing universal health, and upholding the inherent dignity and rights of all peoples.

Done at [City, Country], on this [Day] day of [Month], [Year].

(Signature of Head of State/Government
or Designated Plenipotentiary)
or Designated Plenipotentiary)

(Signature of Head of State/Government

(Printed Name and Title)

(Printed Name and Title)