Joint NGO Submission to the Universal Periodic Review of Thailand on Drug Users in Thailand

Introduction:

1. This report is based on the meeting of February 24, 2011 by the Thai Drug Users Network, PSI Thailand Foundation, Alden House, Foundation for AIDS Rights, Mitsampan Harm Reduction Centre (MSHRC) and the Raks Thai Foundation held in Bangkok Thailand.

Situation of Addictive Substances Users in Thailand

2. Thailand considers addictive drug use to be an illegal behavior. The death penalty is still used for major criminal actions. More recently under the Narcotics Addict Rehabilitation Act B.E. 2545 (2002), Thailand adopted the policy to observed drug users as patients that should undergo a rehabilitation process rather than a criminal act.

3. Thailand has a long history of serve law enforcement against drug abuse and trafficking of drugs. This is most well recorded during the Prime Minister Thaksin’s war against drugs produced some results. Between February and August 2003, over 51,000 arrests and 2000 extra-judicial deaths have occurred, causing worry among international and local human rights watchers.

4. The War on Drugs was seen as key turning point resulting the price increase of drug particularly opiate based substances. Heroine has been more difficult to find and prices increases. The majority of new drug users use various types of methamphetamines. An alarming trend however is the number of users who have started injecting non-opiate drugs such as methamphetamines and codeine. This has increased the proportion of the population that is at risk of HIV and HCV infections. While the government is not adopting harm reduction that recognizes the need for distribution of clean needles and syringes.

A. Constitutional and legislative framework

5. The current Thai Constitution was declared in 2007 by the military government, replacing the previous constitution of 1997. Section 4 of the 2007 Constitution ensures the human dignity, rights and liberties and equality of the people that shall be protected. However, section 5, states that Thai people, irrespective of their origins, sexes or religions, shall enjoy equal protection under this Constitution. Section 32 refers to the right and liberty in his or her life and person and the non-tolerance to torture, brutal act, or punishment using inhumane means with the exception of punishment by execution in accordance with judgment of the Court. Section 32 of also assures that persons will not be arrested or put under detention without a court order or warrant.


B. Cooperation with human rights mechanisms

7. Thailand is now party to 7 core international human rights instruments, namely:
(1) the International Covenant on Civil and Political Rights (ICCPR);
(2) the International Covenant on Economic, Social and Cultural Rights (ICESCR);
(3) the Convention on the Elimination of All Forms of Discrimination Against
Women (CEDAW) and its Optional Protocol;
(4) the Convention on the Rights of the Child (CRC) and its two Optional Protocols
on the Involvement of Children in Armed Conflict and on the Sale of Children, Child
Prostitution, and Child Pornography;
(5) the Convention on the Elimination of All Forms of Racial Discrimination
(CERD);
(6) the Convention Against Torture and other Cruel, Inhuman or Degrading
Treatment or Punishment (CAT); and
(7) the Convention on the Rights of the Persons with Disabilities (CPRD).

8. Thailand has not ratified the International Convention on the Protection of the Rights of all
Migrant Workers and Members of Their Families (ICRMW)

9. Thailand has not ratified the ILO Conventions 87, 98 on the Freedom of Association and
Protection of the Right to Organize and Right to Organize and Collective Bargaining the ILO
Conventions on migrant 97 on Migration for Employment and 143 Migrant Workers
(Supplementary Provisions). Reservations on CEDAW 6, 9

C. Promotion and protection of human rights on the ground
Equality and non-discrimination

10. Thai drug users and suspected drug offenders face stigmatization and an elevated risk of
violence as a result of their government’s ‘hard line’ response to illicit drug use. This is
worsened by constant campaigns that stereotype drug users and criminal acts or less
trustworthy.

Administration of Justice

Policy and Laws
11. Thailand’s laws and policies related to the drug abuse are conflicting and the cause of poor
and law enforcement, corruption and rights violations of suspects of drug use.

12. A major conflict is the definition of drug user as a patient that needs treatment and the
criminalization of drug use behavior. Therefore drug users are not able to seek care and
support as they are more likely to be treated as criminals.

Juridical systems
13. Capital Punishment is still a method used by the juridical system although it is considered a
severe rights violation by most countries. Thailand still refuses to remove this method.

Law enforcement
14. The government, through many ministries, continued campaigns against drugs often stigmatizing people who use drugs, ignores human rights and the dignity/respect of all parties. This has resulted in extensive stigmatization and abuse of power among law enforcement officers.

15. War on Drugs was declared by Ex-Prime Minister Thaksin Shinawatra in February 2003 resulted in an estimate of 2,500 extrajudicial killings and a large number of arbitrary arrests and other human rights violations. This has still not been resolved despite the King of Thailand’s Bhumibol Adulyadej, speech that requested the government’s investigation and revealing of the progress and results.

16. Human Rights Watch reported that – “UN Special Rapporteur on Extrajudicial, Summary or Arbitrary Executions, Asma Jahangir, sent an urgent communication to the Thai government in 2003. In its response, Thailand said that every unnatural death would be thoroughly investigated in accordance with the law. To date, none of the perpetrators of arbitrary killings have been brought to justice.”

17. Detention while waiting for trials or rehabilitation can take up to 45 days. Drug offenders who are users themselves are detained without any provision of services for effects of withdrawal. This, itself is a form of torture with no benefit in drug treatment. Needle and syringe sharing is high due to the lack of access to clean materials. This results in the transmission of HIV and HCV.

18. Violence against women: Women who are drug users are demanded to have sex for freedom of arrest. Women suspects of drug use or trafficking are sometimes subjected to body search by male police officers.

19. Clean and Seal 2010 announced by the Ministry of Interior as another campaign for against drug trafficking and drug use. The campaign refers to the “cleaning: at all levels from the national level, schools, community and family. This again undermines the negative impact on drug-users and leads to stigma and discrimination.

20. Round-up for treatment and rehabilitation that was announced by the Ministry of Interior in February 2011 for 30,000 drug addicts to be rehabilitated is another round of harsh law enforcement measurements that leads to violations and abuse of suspected drug offenders. A number of ex-drug users that had been on the list of police said that they are called upon to be tested to see if they had any evidence of drug use. This caused stress and stigmatization to the person who may have been recorded of drug use in the past.

21. Law officers both in uniform and plainclothes are common to demand inspection and urine testing of suspected drug user both at official checkpoints, along the roadside and in the communities. Many drug users complain about the harassment they receive during the urine testing process as well as cases where law officers place drugs on the suspects. The motivation for police to seek and arrest drug suspects is often the targets assigned to police as well as rewards for arrests. During the round up of 30,000 drug users for rehabilitation, for
example, drug users said that police at the checkpoint would receive a reward of 1,000 baht for each successful arrest.

Right to life, liberty and security of person

22. **Detention centers** Detention of suspected drug offenders without trial and known as forced rehabilitation. These centers are known for the practice of arduous torture and extreme physical cruelty – including sexual violence. Drug users state the forced withdrawal is a form of torture in itself and is ineffective as most drug users who pass this process relapse to drug use. There about 60,000 - 80,000 persons who go through these centers each year.

23. **Drug offenders history records** – police maintain list of drug offenders that names are added but not removed. This list is used by police each time there is a police campaign to round up drug offenders. This practice stigmatizes ex-drug users and places them at risk of police harassment.

24. **White schools, white communities and white workplace** campaigns create discrimination towards current or previous drug users many of which have families or work in the community. The White workplace policy of the Ministry of Labor expects collaborating factories to have their employees tested. Employees who are tested positive of drug user are expected to undergo treatment or leave the company.

25. **Prisons** – A growing proportion of prisoners are imprisoned on drug abuse related crimes. At the same time most prison officials deny drug use in prisons. Many of the prisoners are still addicted to drugs, while the prisons do not have a policy on harm reduction that will enable drug users to manage their addiction safely. This results in smuggling of drugs into prisons and unsafe use of utensils for drug injections resulting in HCV and HIV infections.

Right to social security and to an adequate standard of living

26. Health Rights lack of government policy on harm reduction, training of health personnel and allocation of adequate resources.

a. **Health** - commonly infected with hepatitis C virus (HCV) and human immunodeficiency virus (HIV). One study among 1,859 drug users in northern Thailand showed that HCV prevalence was 27.3%; 86.0% among drug injectors (IDUs) and 5.3% among those who did not inject. 

http://www.ajtmh.org/cgi/content/full/74/6/1111

b. In 1984, first AIDS case seen with rapid transmission of HIV to the intravenous drug users. The pattern of HIV sero-positive prevalence reveals a range of about 16 - 42 percent of IVDUs in all regions and the overall country prevalence is quite constant at approximately 37 percent since 1989. The Ministry of Public Health has ignored this population in the HIV prevention communication. Only in 2009 with the support of the Global Fund Against AIDS, Tuberculosis and Malaria (GFATM) has government attempted to promote harm reduction. Still in practice the Ministry of Public Health does not distribute needles and syringes to injecting drug users. This left to a handful of non-governmental organizations to manage.
As such the safety and security of NGO workers for provide education of on safe injection and other forms of harm reduction and distribute needles and syringes are often at risk of being search or arrested themselves.

c. Methadone program of the government has been used as a short-term course for treatment aimed at termination of drug use and not for methadone maintenance. This was reversed in 2009 when methadone was added to the basic drug list that is included in the National Health Security Office that is part of the health insurance for all Thais not in the social security or civil servants health insurance programs. Still methadone as a long term course is not practiced evenly though out the country and there is no service in prisons.

27. Lack of support to civil society organizations and drug users workers groups and networks to participate in rights protection and the delivery of assistance in health, education and social services. Civil society and drug user groups have demonstrated that they are able to reach drug users and provide health services however the government does not have a plan to integrate and support these services. While the Ministry of Public Health recognizes the role of civil society in providing health information, including basic harm reduction activities, it has not succeeded coming to an agreement with law enforcement officers to protect and not harass volunteers and fiend staff.

Media abuse
28. Media abuses by involuntary media exposure – Media both printed and televised often publicly expose victims or suspects against their will. This is illegal media practice but continues without any attempt by government to stop this practice.

Business and human rights
29. Most employers select not to employ persons with record of drug user or criminal records, even though those persons no longer maintain those behaviors. This is supported by the Ministry of Labor that promotes the “White Factory” or workplace free of drugs.

National Rights Mechanisms
30. National Human Rights Commission – there are many complains toward the National Human Rights Commission as being conservative and passive to the rights issues brought to the commission.

31. **The Civil Society and Human Rights Activists that prepared this paper recommend to the Thai Government that it should:**

- The government should revise its laws to end the practice of capital punishment.
Review and improve laws that contradict between harsh legal process towards drug users and laws that promote the consideration of drug addiction as an illness that should receive medical attention.

The government must immediately and fully investigate the 2,500 extra-juridical killings and other human rights abuses that took place in the context of the 2003 war on drugs and bring the perpetrators of human rights violations to justice. This should be open to the public and monitored by the National Human Rights Council and the civil society.

Law enforcement officers must be trained on human rights, including CEDAW. More effective internal monitoring systems must be in place assuring the prevention of abuse by law enforcement officers. Violations by law officers must be dealt with strictly. In particular law enforcement authorities should ensure this does not cause sexual violence against women or children.

Set up mechanisms to assure that suspected drug offenders have access to legal assistance from a neutral source.

Comprehensive Harm reduction services that include clean needles and syringes, HCV and HIV information and knowledge must be provided at all health centers and in collaboration with civil society to enable reach in the communities of drug users. Harm reduction services should be a basic part of the health system that provides comprehensive care including clean needles, syringes and other required materials to drug users as a health public health strategy. These policies must support the “addiction” as an illness and not as a criminal act.

The Ministry of Public Health should take action to assure that methadone maintenance is widely available through the country, other alternatives such as buprenorphine as well as effective treatment for non-opiate addictions should also be available.

Assure that comprehensive services that include clean needle and syringe distribution and methadone maintenance are available at detention centers waiting for trials and in prisons. This should include condoms and education on diseases transmission.

Provide legal protection for civil society workers who are helping drug users in outreach health programs as well as in providing legal assistance to suspected drug offenders. Provide legal assistance directly to suspected drug offenders.

Fully review forced detention and rehabilitation in terms of its effectiveness and violation of human rights. This should be done with the support of external experts that are objective to the political and authority structures within the country. Temporary holding centers for suspected offenders and prisons should acknowledge the fact that there are drug users within the prison and should provide harm reduction services that include methadone maintenance, clean injection materials, condoms and effective social support.

Stop abuse by media and support media in rights promotion and stigma reduction of affected populations

32. **Allocate budget and set up mechanisms for the protection of drug user rights and social welfare** Ministry of Social Development and Human Security, the Ministry of Interior and the National Human Rights Commission should engage civil society and representatives of drug user groups and networks in the development of related policies that support social
development and human rights protection of drug users and suspected drug offenders. Resources should be provided to civil society organizations and networks that promote human rights of drug users and suspected drug offenders.

33. Organizations that endorse this paper:

- Thai Drug User Network
- Mitsampan Harm Reduction Centre (MSHRC)
- Foundation for AIDS Rights
- Auden House
- PSI Thailand Foundation
- Raks Thai Foundation

End March 14, 2011
March 9, 2011

Reference sources:

http://www.nct.ago.go.th/abstract_punishment.html


Information on War on Drugs http://www.globalsecurity.org/military/world/war/thai-drug-war.htm


**International Drug Policy Consortium (IDPC) Thailand Convicts Police for Brutality in Anti-Drug Campaign** http://www.idpc.net/alerts/thailand-convicts-police-for-brutality


Annop Visudhimark M.D. 1997, Department of Medical Services, Ministry of Public Health, Drug and AIDS in Thailand: Same Policies, Different Laws. How can they be reformed to obtain the most benefit? http://www.drugtext.org/library/articles/visudhimark.htm

News/reports on website

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HEPATITIS C INFECTION AMONG DRUG USERS IN NORTHERN THAILAND http://www.ajtmh.org/cgi/content/full/74/6/1111

In a new wave of repression aimed at drug users, the government of Thailand has begun rounding up suspected "drug addicts" to be forced into "rehabilitation centers." That has health, human rights, and harm reduction groups expressing grave concerns, especially given previous Thai pogroms against drug users, like that in 2003, when tens of thousands were rounded up and more than 2,000 killed by police in summary executions.

The official announcement from the National News Bureau of Thailand of the government's plans came only last week. "The Ministry of Interior has picked next week to get all drug addicts across Thailand clean," it said, with Deputy Permanent Secretary for Interior Surapong Pongtadsirikul as putting the number of untreated addicts at 30,000.

"During 20-27 February, 2011, drug abusers in Bangkok will be brought to the rehabilitation centers to get clean," the notice continued. "There will be those who are encouraged to receive treatment on their freewill and those who will be forced against their will. A rehabilitation camp will be open for addicts elsewhere in Thailand where a rehab center is scarce."

The announcement also said staff training would be carried out and a location for a "makeshift rehab center for drug addicts" will be selected. Chillingly, it added that "their names will be recorded in the database specifically designed for easy tracking and providing updates on their progress in the future."

The roundup has already begun in Bangkok, according to Karyn Kaplan of the Thai AIDS Treatment Action Group (TTAG). "Yes, people are being arrested right now," she said. "The police have quotas, they do this every few months, and this is just another excuse to round people up again. Even in our own small network of people who use drugs, people have been arrested, even workers at our harm reduction center."

While the Thai government officially embraces harm reduction principles -- it adopted harm reduction as a national strategy last fall -- it schizophrenically continues its crackdowns on drug users and sends them to "treatment centers" not worthy of the name.

"We don't call them treatment centers, because they aren't run by people who know how to treat people," said Kaplan. "They were originally set up because of prison overcrowding, but even though they have a policy that says drug users are patients, not criminals, they still use the police to sweep the streets and throw people into the system. But then the system says there is no room in prison, send them to the camps. The camps are in military bases and run by the military, and
they aren't trained for that. The military is just housing them, and there are beatings and forced labor for no money. There is no due process," she said.

It is as if the Thai government's left hand doesn't know what its right hand is doing, said Kaplan. "The government at least pays lip service to harm reduction, but the Ministry of the Interior is not talking to the Narcotics Control Board, which sponsors the harm reduction policy," she said. "We have gotten unofficial statements from senior officials inside the Public Health Ministry saying they are going to speak with the board and the Interior Ministry about what Thailand might do more effectively."

In the mean time, the roundups continue.

The threat of the mass roundup of suspected drug users has led a coalition of Thai and international health, harm reduction, and human rights organizations to publicly air their fears that it will trample on human rights and could lead to the widespread abuses of drug users seen in other Thai anti-drug campaigns.

"These plans for mass detention and forced treatment raise considerable human rights concerns, especially given Thailand's history of nationwide punitive and ineffective anti-drug campaigns," they said in an open letter to the Thai government. "There is no way for the government to implement a campaign to forcibly 'treat' tens of thousands of people who use drugs without widespread human rights abuses taking place."

Groups signing on to the letter include the TTAG, the International Harm Reduction Association (IHRA), the International Drug Policy Consortium (IDPC), the International Harm Reduction Program of the Open Society Institute, the Canadian HIV/AIDS Legal Network, and the International Network of People Who Use Drugs (INPUD).

"The mandatory rounding up and detention of people who use illicit drugs for the purpose of enforced treatment is not only a violation of their human rights, it's a violation of common sense -- enforced detention doesn't work," said INPUD's Jude Byrne. "Never has, never will! Communities need to look to the reason people are using drugs. Stop the systemic violence against the poor, minorities, people of different sexual persuasion and the unemployed. Rounding up the most marginalized people in the community will do nothing except provide jobs for the police and the people who run the detention centers. It will also drive INPUD's community underground so they are not able to access harm reduction information or equipment where it is available. The transmission of HIV and Hep C among the injecting drug using community will soar, and that is the real crime, not the use of drugs."

"This crackdown flies in the face of Thailand's 2002 policy, which states that people who use drugs should be treated as patients, not criminals. There is nothing therapeutic about rounding up thousands of drug users and forcing them into military boot camps that fail to provide appropriate services and support," said Paisan Suwannawong, TTAG executive director and co-founder of the Thai Drug Users' Network.

While the Thai government refers to "drug addicts," its plans appear to include any drug users.
Under the current plan, "occasional" users will be detained for one week, "continuous" users for two weeks, and those showing signs of drug dependence for 6 1/2 weeks (45 days).

"There are many reasons to be worried," said IHRA executive director Rick Lines. "Due process guarantees have been thrown out the window. What is the legal basis for mass detention? There are numerous examples of how forced detention in the name of drug dependence 'treatment' can lead to human rights violations and breaches of accepted principles of medical ethics," he continued. "What is more, many who do not need any form of drug dependence treatment will be herded into detention centers. Where is the clinical assessment?" he asked.

The activists also expressed concern about the temporary detention centers that will be set up outside Bangkok. They feared they would be operated not by health workers, but by police or soldiers, they said.

"We are profoundly concerned that these centers may be run by public security forces such as the police or paramilitary civil-defense organizations" said Kaplan. "It is dangerous and extremely disheartening given recent progress made in the country on injecting drug use and HIV. This can only serve to undermine those efforts in the long term. The immediate concern, however, is for the safety and well-being of those targeted."

But the medium term goal is to persuade the Thai government to embrace not merely the rhetoric of harm reduction, but the practice. That is going to take continuing pressure on the government, and the United Nations needs to step up, said Kaplan.

"We need more high-level action to push the government over to harm reduction," she said. "The World Health Organization and the UN Office on Drugs and Crime don't listen to civil society, so we need governments to step up. It is very important and progressive that Thailand is talking harm reduction, but to actually do it, they need a lot of help."

Thailand

**Thailand Convicts Police for Brutality in Anti-Drug Campaign**

Human Rights Watch has noted that the conviction of eight police officers for crimes in anti-drug operations should be a catalyst for the Thai government to end police abuses.

On December 8, 2009, the Talingchan district court in Bangkok found Police Captain Nat Chonnithiwaniit and seven other members of the 41st Border Patrol Police (BPP) unit guilty of assault with weapons, illegal detention, and extortion. Each was sentenced to five years of imprisonment.

“The trial of Captain Nat and his team revealed just how casually police commit abuses,” said Elaine Pearson, deputy Asia director at Human Rights Watch. “This conviction needs to be followed up by clear action to put an end to police abuses once and for all.”
Nat and his BPP team were arrested in Bangkok in January 2008 for serious offenses committed over a period of three years. To date, 61 people have filed formal complaints that they or their family members were abused by BPP police under Nat’s command.

In the case that led to the convictions, Nat’s squad arbitrarily arrested Jutaporn Nunrod in Bangkok on February 8, 2007, and then took her to a “safe house” at the Green Inn Hotel. She was stripped half-naked, subjected to electric shock, severely beaten, and had a plastic bag placed over her head for two days in order to extract a confession that she was involved in drug trafficking. Jutaporn and her family were also forced to give cash and a gold necklace worth 100,000 Thai baht (US$3,000) to Nat.

Other victims of Nat and his squad claim they were subjected to electric shock, had plastic bags placed over their heads, and were severely beaten. Many also claimed they were forced to pay bribes in order to be released or to have lesser charges filed against them.

“These convictions were not an isolated case of rogue officers, but part of chronic problems in police operations that use violence and illegality to fight crimes,” said Pearson. “Police in Thailand have long had sweeping powers and have rarely faced punishment for often horrendous misconduct.”

Thailand saw the worst police abuses after then Prime Minister Thaksin Shinawatra launched his notorious “war on drugs” campaign in 2003. During this campaign, Thaksin openly pushed police to adopt unlawful measures against drug traffickers.

“There is nothing under the sun which the Thai police cannot do,” Thaksin said on January 14, 2003, adding, “You must use iron fist against drugs traffickers and show them no mercy. Because drug traffickers are ruthless to our children, so being ruthless back to them is not a bad thing…If there are deaths among traffickers, it is normal.”

In January 2008, a special committee chaired by former Attorney General Khanit na Nakhon found that 2,819 people were killed in 2,559 murder cases between February and April in 2003 as part of Thaksin’s “war on drugs.” But despite many promises by Prime Minister Abhisit Vejjajiva to bring those responsible for the “war on drugs” murders and related abuses to justice, no action has ensued. Many police officers implicated in this inquiry and follow-up investigations by the Justice Ministry’s Department of Special Investigation remain in office. Many have even been promoted. The failure to hold abusive police accountable makes it more likely that killings, torture, and extortion will happen again, especially in the context of drug suppression operations, said Human Rights Watch.

Thailand continues to face a boom in the use and trafficking of methamphetamines. For that reason, harsh measures against traffickers are politically popular. On December 3, Interior Minister Chavarat Charnvirakul launched a new nation-wide campaign, called “Clean and Seal.” This campaign will initially go on for three months and seek to thoroughly “clean up” 16,106 communities of drugs users and traffickers. While traffickers will be arrested and prosecuted, those caught using drugs will be sent to a rehabilitation program at military-style camps run by the Interior Ministry.
“Unrealistic targets set by politicians, combined with deep-rooted police brutality and impunity raise grave concerns about this ‘Clean and Seal’ campaign,” said Pearson. “To prevent his government from going down the same road as Thaksin, Prime Minister Abhisit should set a new standard by ensuring that abusers will be prosecuted.”