



# GENDERED IMPACT OF THE CNSA 1997: STRUCTURAL VULNERABILITIES AND PATHS TO REFORM

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# **Executive Summary**

The "war on drugs" has disproportionately affected women, with 35% of female prisoners globally incarcerated for drug-related offences. In Pakistan, the Control of Narcotics Substances Act, 1997 (CNSA) enforces harsh penalties without addressing gender-specific vulnerabilities. Women involved in drug offences often face coercion, poverty, or manipulation and encounter stigma, inadequate legal aid, and gender-insensitive policies.

Key challenges for women prisoners in Pakistan include prolonged pretrial detention, inadequate healthcare, disrupted family roles, and limited rehabilitation programs. Current prison policies fail to meet women's specific needs, such as reproductive and mental health care. Furthermore, Pakistan lacks diversionary measures and community-based alternatives to incarceration, as emphasized by international standards like the Bangkok Rules.

This brief highlights the CNSA's gendered impact, its alignment with global norms, and the consequences of punitive drug policies on women. Drawing on case studies and testimonies, it provides evidence-based recommendations for reform, including gender-sensitive sentencing, improved prison conditions, and community-based alternatives to incarceration. Addressing these systemic gaps is essential for reducing inequalities and ensuring justice for women affected by drug policies.

# I. BACKGROUND

The 'war on drugs' (global and domestic) and its associated prohibitionist policies and harsh punishments for drug-related crime have contributed greatly to the growth in women's incarceration numbers around the world. Approximately, 1 in 5 people currently in prison around the world are there because of a drug offence.

Drug-related offences are known to have a particular and disproportionate impact on women. 35% of women globally are in prison for drug-related offenses compared to 19% of men<sup>1</sup>. It is clear from country-based research that the number of women in prison has not grown dramatically because of an increase in criminal activity, but because of political choices, including harsh drug policies.<sup>2</sup>

<sup>1.</sup> Prison Policy Initiative. 1 in 5 people are incarcerated for a drug offence. Available here: https://www.prisonpolicy.org/graphs/pie2023\_drugs.html

<sup>2.</sup> Office of the High Commissioner for Human Rights (OHCHR). UN experts call for end to war on drugs. Available here: https://www.ohchr.org/en/press-releases/2023/06/un-experts-call-end-global-war-drugs#:~:text=Although%20one%20in%20three%20people,compared%20to%2019%25%20of%20men

The Global Commission on Drug Policy argues that despite harsher laws and policies and rising incarceration rates, it is not clear that the drug policies are having their intended effect of reducing or eliminating drug offences. The complex reasons and pathways of women's confrontation with criminal justice systems for drug-related offences are not reflected in legislation on drug-related crimes or sentencing guidelines, nor sentencing practice.

In Pakistan, the Control of Narcotics Substances Act 1997 (CNSA) is a manifestation of these global trends, with stringent penalties applied uniformly without accounting for gender-specific vulnerabilities. In line with global averages, many women involved in drug-related crimes in Pakistan are victims of poverty, coercion, or manipulation by criminal networks. Yet, existing legal and judicial systems lack the mechanisms to address such mitigating circumstances, resulting in systemic injustices. Without gender-sensitive sentencing practices or considerations for factors such as caregiving roles or histories of abuse, the country's narcotics laws perpetuate cycles of marginalization and fail to reduce drug-related crimes effectively.

### Women Incarcerated for Drug Offences in Pakistan

In 2023, the Anti-Narcotics Force (ANF) made 1,782 arrests under Pakistan's Control of Narcotics Substances Act (CNSA), with 30% occurring in Azad Kashmir and Gilgit Baltistan, and women accounting for approximately 8% of those arrested. As of January 2025, 21,824 individuals are imprisoned in Pakistan's jails under the CNSA, representing 21.39% of the total prison population of Pakistan, with Punjab leading at 56.3% of these incarcerations. Drug offences are the second leading cause of incarceration for women, with stark provincial disparities: Punjab incarcerates 323 women (311 as traffickers/peddlers and 12 as users), Khyber Pakhtunkhwa (KP) holds 24, Sindh 40, Balochistan 25 and 3 in Azad Jammu & Kashmir. 6

The significant representation of women as traffickers, particularly in Punjab, raises questions about socio-economic vulnerabilities, coercion, and systemic failures in legal representation and sentencing practices. Women incarcerated under CNSA face compounded challenges, including stigma, gender-insensitive prison policies, and limited access to legal aid, emphasising the urgent need for gender-responsive reforms to address these systemic inequities.

<sup>3.</sup> Global Commission on Drug Policies. War on Drugs. Report of the GCPD (2011). Available here:

https://www.globalcommissionondrugs.org/wp-content/themes/gcdp\_v1/pdf/Global\_Commission\_Report\_English.pdf

<sup>4.</sup> Justice Project Pakistan (JPP). Narcotics Offences Dataset: Statistical Analysis and Qualitative Overview (2024). Available here: https://jpp.org.pk/wp-content/uploads/2024/04/Narcotics-Offences-Dataset.pdf (JPP Report)

<sup>5.</sup> National Commission for Human Rights, National Academy for Prisons Administration and Justice Project Pakistan. Prison Data Report 2024 https://jppprisonreforms.com/

<sup>6.</sup> Justice Project Pakistan, Narcotics Offences Factsheet (2025).

# OLICY BRIEF -

# II. LEGAL FRAMEWORKS

#### **Domestic Standards**

Pakistan's legal framework for the control of narcotics and its implications for women is shaped by several laws and policies. The Control of Narcotics Substances Act, 1997 (CNSA) is Pakistan's principal legislation addressing the criminalisation of the production, possession, trafficking, and sale of narcotics, psychotropic substances, and precursor chemicals. Combined with the Anti-Narcotics Force Act, 1997, the CNSA lays out the detailed process of arrest and imprisonment. It additionally lays out the powers of the police with respect to those charged for crimes under the CNSA, and grants exclusive jurisdiction to Special Courts to try these cases. The CNSA notifies special courts under Section 46 to try narcotics cases. 6 Special Courts are in operation, currently.

Previously, sentences under the CNSA could vary depending on the amount of substance but not based on any differentiation on the category of the substance. In 2009, the Lahore High Court laid out uniform sentencing guidelines for narcotics offences in *Ghulam Murtaza v. The State*. The guidelines were upheld by the Supreme Court in 2019.

Amendment to the CNSA in **2022** introduced stricter punitive measures. Section 9A now prohibits sentence remissions for most offenders, though the Federal Government may grant remissions for women and juveniles under broad discretionary language. Additionally, the amendment **prohibits probation and parole** for individuals convicted under the CNSA, overriding other laws. This marks a significant departure from the original Act, which allowed greater flexibility in sentencing and rehabilitation.

These amendments undermine principles of proportionate sentencing and rehabilitation, limiting opportunities for reintegration and potentially violating international human rights standards, including the right to health. While sentences under the CNSA were historically based solely on substance quantity, amendments in 2022 linked penalties to both the nature and quantity of the substance. A **2023 Amendment eliminated the death penalty** for drug offences, but courts continued to impose death sentences in 2024. The law does not differentiate between male and female offenders or consider vulnerabilities such as socio-economic circumstances, caregiving responsibilities, or coercion.

The primary operational document governing prison administration in Pakistan is the Pakistan Prisons Rules 1978, also known as the "Jail Manual." The Prison Rules have 50 chapters comprising 1,250 rules that provide for classification of prisons; duties of the prison's administrative and medical officers; prisoners' admission, remission, transfer, and release; and prisoner's diet, clothing and equipment, and other issues concerning prisoners.

#### International Standards

In 2011, the General Assembly, by its resolution 65/229, adopted the United Nations Rules for the Treatment of Women Prisoners and Non-custodial Measures for Women Offenders (**the Bangkok Rules**), which established for the first time standards that relate specifically to women prisoners, offenders and accused persons. The Bangkok Rules recognise that the international law principle of non-discrimination requires States to address the particular challenges that women confront in the criminal justice and penitentiary systems (rule 1). The Bangkok Rules call for gender-sensitive justice measures, recognising the distinct pathways of women into crime, their caregiving roles, and the disproportionate impact of incarceration on them and their families. These rules supplement the standards of the Standard Minimum Rules for the Treatment of Prisoners and the United Nations Standard Minimum Rules for Non-custodial Measures (**the Tokyo Rules**), which afford protection to all prisoners and offenders, respectively.

International standards recognise that "violence against women has specific implications for women's contact with the criminal justice system", and that violence against women may be a cause of women's involvement in criminal offences and subsequent imprisonment.

Similarly, The **International Guidelines on Human Rights and Drug Policy**, developed by the UNDP, UNAIDS, and WHO, provide a rights-based approach to addressing drug-related offences. These guidelines call for proportional sentencing and stress that drug policies should prioritise health, human rights, and social welfare over punitive approaches. They emphasise the need for gender-sensitive measures in drug policy, recognizing the unique challenges faced by women, such as caregiving roles, socio-economic disadvantage, and histories of victimisation. The guidelines further advocate for access to healthcare, harm reduction programs, and rehabilitation services for individuals involved in drug-related offences, underscoring the importance of treating drug dependence as a public health issue rather than a purely criminal matter.

States have a duty to address the structural causes that contribute to women's incarceration and to address root causes and risk factors related to crime and victimization through social, economic, health, educational and justice policies. Member States have been called upon to develop gender-specific sentencing alternatives and to recognize women's histories of victimization when making decisions about incarceration.

# III. ASSESSMENT

There is growing evidence that the effects of drug dependence and addiction do not always impact men and women in the same manner and the biological mechanisms involved in drug dependence are not identical in males and females.

Both drug use and incarceration carry stigma for men and women, but the degree of stigma is much greater for women because of gender-based stereotypes that hold women to different standards. Under legal frameworks such as Pakistan's CNSA, gender-neutral approaches often result in women being subjected to the same correctional procedures as men. However, this fails to account for the distinct vulnerabilities and needs of incarcerated women. Women in Pakistan's prisons face unique challenges arising from their gender and caregiving responsibilities, which are often overlooked. Separation from their homes, families, and communities disproportionately affects women, undermining their mental well-being and emotional health. The social fabric in Pakistan places a significant burden of family and community roles on women, making imprisonment particularly disruptive for them. This disruption is further compounded by the typical backgrounds of many women prisoners, who are often survivors of domestic violence, sexual abuse, or other forms of exploitation. These traumas necessitate more extensive psycho-social support for women compared to men. Additionally, many women prisoners in Pakistan are illiterate, unaware of their legal rights, and lack the confidence to navigate the justice system. This leaves them vulnerable to exploitation within the legal and correctional systems.

#### **Pathways to Crime**

Research on women prisoners in Pakistan shows that women that commit crimes like drug dealing, smuggling, theft and prostitution hail from economically disadvantaged backgrounds. Often the primary breadwinner for their families, they indulged in criminal activities to make ends meet. Women in the drug trade perform high-risk jobs at low levels of the ladder of organised crime, in an unregulated economy that is predominantly controlled by men. Women in these vulnerable occupations—such as small-scale couriers, low-volume sellers or transporters—are more likely to be arrested and incarcerated, where they are subjected to the full weight of punitive drug policy.

There is a dearth of research specific to female prisoners convicted under drug laws in Pakistan. However, studies across countries show that women involved in trafficking drugs are often victims of trafficking in persons, including trafficking for the purposes of sexual exploitation. Women's participation in the drug supply chain can often be attributed to vulnerability and oppression, where they are forced to act out of fear. Some researchers have noted that women may feel compelled to accept lower rates of payment than men to carry out drug trafficking activities, which means that some drug trafficking organizations may be more likely to use women as "mules".

For example, in 2014, Khadija Shah, a British national, was sentenced to life imprisonment for trying to smuggle heroin out of Pakistan. She denied any knowledge of the drugs, saying she had been persuaded by an unnamed man to carry the suitcases and had no idea of their contents. 6 months pregnant at the time of her arrest, Khadija's family claimed that drug traffickers had taken advantage of her vulnerable state.

Women are also generally less likely than men to be able to afford fines or to pay the surety required for bail. They may also be less aware of their legal rights.

#### Lack of Legal Awareness and Representation

A lack of legal awareness and representation severely affects women charged with drug offenses in Pakistan, particularly those from poor and marginalized communities. According to a UNODC Pakistan study, many incarcerated women lack the financial means to hire a lawyer and are often illiterate, leaving them unaware of their legal rights. A study of four women's prisons in Sindh revealed that 59 out of 100 women inmates did not even know the date of their arrest, placing them in a vulnerable position and increasing the likelihood of signing statements with serious legal implications. The absence of timely legal representation often leads to prolonged delays in the criminal justice process and diminishes the chances of securing bail. The same study found that 27 women had signed confessions while in police custody before court proceedings began. Of these, 21 women reported being forced to confess under physical torture, psychological threats, or pressure from male relatives or tribal leaders, while seven were coerced into signing blank papers that the police later filled with incriminating charges. Nearly half of the lawyers representing these inmates were hired by their families, while government or NGO-provided lawyers were rare, often arriving six months to a year after arrest. Alarmingly, 22 women had no legal representation at all, and some had never even met their lawyers.

## **Prolonged Detention**

A large proportion of women incarcerated worldwide are in pretrial detention. Some have been detained for years, often longer than the sentence they are potentially facing. In Pakistan, over half of all female prisoners interviewed for a UNODC study were on trial, and one fifth of them had spent over a year awaiting trial. A study by the Ministry of Human Rights confirmed that 66.7% of Pakistan's female prison population constitutes those under trial.<sup>13</sup>

The 2022 Amendment to the CNSA contribute to prolonged pretrial detention of women facing charges for drug offences. Section 49-A allows for extended remand periods for up to 90 days. The law creates no requirements on judges granting remand to record reasons in writing, leading to extended remand periods and prolonged detention of women.

<sup>10.</sup>UN Office on Drugs and Crime (UNODC). Females behind Bars: Situation and Needs Assessment in Female Prisons and Barracks. 2011 (UNODC Report)

<sup>11.</sup> Baloch, G. From arrest to trial court: the story of women prisoners of Pakistan. Procedia - Social and Behavioral Sciences 91 (2013) 158 - 170

<sup>12.</sup> ld

<sup>13.</sup> Ministry of Human Rights, Government of Pakistan. Plight of Women in Pakistan's Prisons: Report. Available here: https://mohr.gov.pk/Sitelmage/Misc/files/Prison%20Report\_acknowledgment.pdf (MOHR Report)

#### Lack of Rehabilitation

According to the Ministry of Human Rights Report, while vocational training programs and basic mental health services are available for female prisoners in most provinces of Pakistan, significant gaps remain in addressing the specific needs of incarcerated women, particularly those related to drug dependency and trauma. A UNODC study found that 28% of female prisoners in Pakistan reported regular drug use before imprisonment, yet the prison environment provides no structured detoxification or rehabilitation programs, with only one woman in the study admitting to receiving proper detoxification. Historically, punitive approaches to drug use have meant that harm reduction services are less available in prisons than in the community, and drug treatment services in prisons are mostly abstinence-based. The abrupt withdrawal from drugs in prisons, coupled with a lack of medical and psychological support, exacerbates the distress of these women, many of whom also have histories of domestic violence or sexual abuse. While female psychologists are present in some prisons, their services are limited in scope and fail to comprehensively address the intersection of substance abuse and trauma.

While Section 53 of the CNSA obligates provincial governments to establish centers for detoxification, rehabilitation, and social reintegration, such centers remain scarce or ineffective, and post-release support is inadequate. Additionally, the compulsory registration of individuals, including women, as "addicts" under Section 52 of the CNSA violates fundamental principles of privacy, non-discrimination, and the right to health, as outlined in the International Guidelines on Human Rights and Drug Policy. The registration system stigmatises women who use drugs, discouraging them from seeking voluntary treatment or harm reduction services out of fear of being labeled and targeted.

The lack of gender-sensitive rehabilitation programs, coupled with the coercive framework of the CNSA, prevents meaningful reintegration and perpetuates cycles of incarceration and marginalisation for women drug offenders in Pakistan. Addressing these systemic deficiencies requires integrating trauma-informed care, harm reduction, and comprehensive post-release support into the rehabilitation framework while ensuring respect for human rights and individual autonomy.

#### **Differential Impact of Incarceration**

Female prisoners often face conditions that are worse than those experienced by their male counterparts. It is argued that prisons were made with men in mind, and gender-neutral policies can have serious negative consequences for women prisoners. Both drug use and incarceration carry stigma for men and women, but the degree of stigma is much greater for women because of gender-based stereotypes that hold women to different standards.

Many women charged with drug-related offences suffer from drug dependence, psychiatric disorders and a history of physical and sexual abuse. The standard practices under prisons in Pakistan, such as search, restraint and isolation can have profound effects on women with a history of abuse, trauma or mental illness and often act as triggers that re-traumatise women who have post-traumatic stress disorder

According to the Bangkok Rules (4), female prisoners should be held in prisons close to their home districts. However, currently approximately 27% of female prisoners in Pakistan are being held in prisons away from their homes, which is severely detrimental in terms of close family contact.<sup>14</sup>

#### a. Access to healthcare

As per Rule 18 of the Pakistan Prison Rules, new female prisoners are screened for medical conditions and diseases at the time of induction by female medical officers. In Punjab, this includes a comprehensive assessment of mental health and drug dependence in accordance with the Bangkok Rules (2–3 and 40–42). The Sindh Prison Rules (747) also comprehensively handle the screening of women prisoners, emphasizing holistic health screening including mental health care needs, the reproductive health history of a woman prisoner, and drug dependencies.

However, in practice, Pakistan's Ministry of Human Rights reports that women prisoners received inadequate medical care and that officials routinely ignored laws meant to protect women prisoners. Women prisoners face even greater challenges in accessing the specialist healthcare that they require. Prison authorities report that women receive visits from the district health departments, but that there is a shortage of woman doctors. In some prisons, for example, Karachi and Rawalpindi, NGOs were providing additional healthcare support to women prisoners. A critical lack of funding in the prison healthcare system has meant that mothers whose children accompany them in prison often lack essential health care, leaving both women and children at risk.

#### b. Impact on Children

Incarceration of mothers throughout the world has an impact on vast numbers of children. The United Nations (UN) Global Study on Children Deprived of Liberty estimated that in 2017 there were approximately 19,000 children living in prison with a primary caregiver (normally their mother). Children accompanying women in jails are "secondary victims" as spending formative years spent in jail affects their intellectual growth and emotional development. According to the Ministry of Human Rights, there are a total of 134 mothers who have children residing with them within prison premises. The total number of children in prisons is 195. The rules allow children to stay with their detained mothers until the age of five, but reports suggest that in some cases, they live there up to the age of 9 or 10.

#### c. Violence

Human Rights Watch warned in a report that female prisoners in Pakistan were "especially vulnerable to being abused by male prison guards, including sexual assault, rape, and being pressured to engage in sex in exchange for food or favor." Rights activists also warn that juvenile prisoners are also not kept separately. 19

#### d. Overcrowding, poor nutrition and lack of feminine-specific care

Prisons are ordinarily modelled on men's needs, with little or no attention paid to gender-specific issues such as menses, menopause, gynaecological facilities, adequate nutrition for pregnant women, and other basic sexual and reproductive needs.<sup>20</sup>

In Pakistan the majority of the prisons are overcrowded, which contributes to the emerging issues of poor health and hygiene, high risk behaviour (e.g. suicide, unprotected and forced sexual contact, drug misuse), and poor prison management leading to torture, riots and corruption. According to the Prisons Data Report 2024, Pakistan's prisons are severely overcrowded, operating at 152.2% of their official capacity. The total prison population is 102,026 inmates housed in facilities designed for only 65,811 people. Under-trial prisoners comprise 73.41% of the total population (74,918 prisoners), reflecting a concerning increase from 66% in 2017. There are 1,550 women prisoners (approximately 1.5% of the total prison population), with 73.41% of them being under trial. The prison system has only four dedicated women's prisons - three in Sindh (Karachi, Hyderabad, and Sukkur) and one in Multan, Punjab. Most women are housed in separate barracks within male prisons.

# **Alternatives to Imprisonment**

The Bangkok Rules recognise that many women, including those charged with or convicted of drug offences, should not be in prison given the harmful impact of imprisonment. Rule 62 requires the 'provision of gender-sensitive, trauma-informed, women-only drug dependence treatment programmes in the community' for diversion and alternative sentencing purposes for offences entailing drug use. There are currently no diversionary measures, pre-trial or sentencing alternatives for women prisoners in any province in Pakistan. Additionally, the CNSA does not contain any provisions providing for diversion and alternatives to incarceration or conviction for women or children. Although all of the provinces reported that remissions were granted to female prisoners in accordance with Chapter 9 of the Pakistan Prison Rules, parole programmes did not exist in any of the provinces apart from Sindh.

<sup>18.</sup> Human Rights Watch report

<sup>19.</sup> Achakzai, J. Why are women being imprisoned? DW. 19.03.2024. Available here: https://www.dw.com/en/pakistan-why-are-more-women-being-imprisoned/a-68615741

<sup>20.</sup> UNODC. Handbook on Women and Imprisonment. 2nd Edition. 2014. Available here: https://www.unodc.org/documents/justice-and-prison-reform/women\_and\_imprisonment\_-\_2nd\_edition.pdf

<sup>21.</sup> National Commission for Human Rights, National Academy for Prisons Administration and Justice Project Pakistan. Prison Data Report 2024. Available here: https://jppprisonreforms.com/

<sup>22.</sup> MOHR Report at p.11

# IV. CASE STUDIES

# Sakina Ramzan: 77 year old acquitted following 7 years imprisonment under Pakistan's narcotics penal regime <sup>23</sup>

In February 2016, a special court for control of narcotic substances in Karachi convicted Sakina Ramzan, 77, under the Control of Narcotic Substances Act, 1997, sentencing her to life imprisonment. Ramzan, a widow and resident of Quetta, was employed as a domestic worker prior to her imprisonment. Her employer, Muhammad Afzal, had sent her to Karachi with some electronic items in 2014. He had told her that the items were to be included in the dowry for a marriage and handed over to a person in Sohrab Goth. However, when the electronics were screened upon Ramzan's arrival in Karachi, customs officials claimed to have found drugs hidden inside them.

Her co-accused, the driver Abdul Ghaffar, was acquitted by the trial court. Sakina's subsequent appeal to the Sindh High Court was dismissed in 2018. On appeal, the Supreme Court acquitted her in January 2021, citing significant procedural lapses in the prosecution's case. The Court highlighted inconsistencies in witness testimonies, particularly concerning the chain of custody of the seized narcotics, and non-compliance with mandatory legal procedures for handling and testing the contraband. Sakina's case underscores the challenges faced by marginalized individuals within Pakistan's criminal justice system, particularly concerning stringent narcotics laws and the necessity for strict adherence to legal protocols to prevent miscarriages of justice.

# Tereza Hluzkova: Czech national acquitted from Pakistani Prison<sup>24</sup>

Tereza Hluskova, a 21-year-old Czech national, was arrested at Lahore's Allama Iqbal International Airport in January 2018 for allegedly attempting to smuggle 8.5 kilograms of heroin to the United Arab Emirates. Her arrest and subsequent trial drew international attention, not only due to her foreign nationality but also because her case highlighted significant vulnerabilities faced by women accused under Pakistan's narcotics laws. Hluskova claimed she had come to Pakistan as a tourist and was unaware that the suitcase she carried contained heroin. She alleged she was deceived by an acquaintance who lured her into unwillingly transporting the drugs. Despite her assertions of innocence, she was charged under the Control of Narcotics Substances Act, 1997. Following her conviction in 2019, Hluskova was sentenced to over eight years in prison. After a series of appeals, Hluskova was acquitted in November 2021 by the Lahore High Court, citing insufficient evidence.

#### Khadijah Shah: Mother of 3 facing a life sentence

Khadija Shah, a British national of Pakistani descent, was arrested in May 2012 at Benazir Bhutto International Airport in Islamabad for attempting to smuggle heroin. Pregnant at the time of her arrest, Shah was caught with over 60 kilograms of heroin concealed in her luggage.

She claimed she was unaware of the presence of drugs and insisted she had been deceived by a drug trafficking network that exploited her naivety. According to her lawyers, she was asked to carry the bags by the person she thought was her boyfriend, a British national, and who brought her to Pakistan, and she has given the authorities his details. Shah was charged under Pakistan's Control of Narcotic Substances Act (CNSA), which mandates severe penalties for drug trafficking, including life imprisonment or death. Despite her claims of innocence and limited evidence of her direct involvement in the trafficking network, Shah was convicted in 2014 and sentenced to life imprisonment.

Shah gave birth to daughter Malaika while in prison. Relatives have raised concerns for the health of both mother and child, pointing out that the baby had not received inoculations and was at risk of multiple infectious diseases. Malaika had spent her entire life living behind bars before being released to the UK in 2019 when she was 6 years old.

# V. RECOMMENDATIONS

The punitive framework of the CNSA disproportionately impacts women, perpetuating cycles of poverty, marginalisation, and stigma. Reforming the CNSA to incorporate gender-sensitive alternatives and align with the Bangkok Rules is essential to uphold justice and human rights.

By prioritising non-custodial measures, investing in rehabilitation, and addressing the root causes of women's involvement in drug offences, Pakistan can transition towards a more equitable and effective approach to drug policy.

- a. Remove all criminal penalties, including detention, for offences such as drug use, cultivation and possession of drugs for personal use, and possession of drug use paraphernalia, such as needles and syringes. Punishment and stigmatisation of people who use drugs an issue particularly relevant to women who use drugs as they are facing significant stigma and discrimination for contravening their traditional roles as mothers and caretakers. Decriminalisation policies pave the way for providing an enabling and supportive environment for the provision of gender-responsive harm reduction.
- **b.** Address the disproportionate use of pre-trial detention for drug offences, especially for women, and repeal laws and policies that exclude people convicted for drug offences from alternatives to imprisonment.
- c. Establish sentencing guidelines that allow for the systematic consideration of mitigating circumstances in sentencing for drug offences, taking into account the role of the person in the illegal drug trade, as well as the reasons for their involvement bearing in mind that prison should only be used as a measure of last resort. Establish gender-sensitive mitigating circumstances that address the main pathways of women's involvement into illegal drug economies, such as a history of trauma or partner violence, coercion, caretaking responsibilities, drug dependence and others.

- **d.** Reform prison rules and practices to bring them in line with international standards such as the Nelson Mandela Rules and the Bangkok Rules and address the specific challenges faced by women and children, including menstrual and reproductive health.
- e. Prison health services should provide or facilitate specialized treatment programmes designed for women substance abusers, taking into account prior victimization, the special needs of pregnant women and women with children, as well as their diverse cultural backgrounds.
- f. Women prisoners whose children are in prison with them should be provided with the maximum possible opportunities to spend time with their children. If the woman prisoner is accompanied by a child, that child shall also undergo health screening, preferably by a child health specialist, to determine any treatment and medical needs.
- g. Provide drug treatment, harm reduction and other drug services, in the context of diversion measures and alternatives to punishment and imprisonment that are evidence-based, gender-sensitive, and trauma-informed. Abolish compulsory drug treatment, within and outside criminal justice systems. Engagement with services must be strictly voluntary, non-judgemental and non-conditional; rejection or discontinuation of treatment should not entail punishment or imprisonment.