



Human Rights Violations Against People Who Use Drugs in Armenia

Report - 2025

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Background and Context

Drug Use as a Human Rights and Public Health Issue

- Drug use in Armenia is increasingly addressed through punitive and criminal justice approaches
- Public health indicators demonstrate growing challenges related to drug use, HIV, Hepatitis C, and overdose risks
- People who use drugs (PWUD) and individuals receiving opioid agonist treatment (OAT/Methadone) face systemic stigma and discrimination
- International standards recognize drug dependence as a health condition, not a moral or criminal failing

Key Data

- 7,512 registered people diagnosed with drug dependence in Armenia (2024)
- Significant increase in drug-related criminal cases in recent years
- High prevalence of HIV and Hepatitis C among PWID

Systemic Abuses by Law Enforcement Authorities

Common Violations

- Arbitrary stops, searches, and detentions
- Excessive use of force and physical violence
- Humiliating and degrading treatment
- Denial of access to lawyers and legal defense
- Interruption of methadone treatment during detention
- Targeted surveillance of OAT patients



Systemic Abuses by Law Enforcement Authorities

Key Findings

- PWUD are frequently treated as “presumed offenders”
- Police practices often lack legal basis and proportionality
- Methadone withdrawal is reportedly used as a coercive mechanism

Human Rights Affected

- Freedom from torture and degrading treatment
- Right to liberty and security
- Right to fair trial and legal defense
- Right to private and family life



Discrimination and Barriers in Healthcare

Main Problems

- Refusal or delay of medical treatment
- Stigmatizing attitudes by healthcare workers
- Interruption or denial of OAT services
- Inadequate pain management
- Breaches of medical confidentiality
- Fear of seeking medical care due to police involvement



Discrimination and Barriers in Healthcare

Structural Issues

- Drug dependence often perceived morally rather than medically
- Lack of evidence-based and rights-based healthcare approaches
- Weak continuity of care in detention settings

Consequences

- Avoidance of healthcare services
- Increased health risks and preventable harm
- Deepening social exclusion



Stigma Beyond State Institutions

Social and Family Sphere

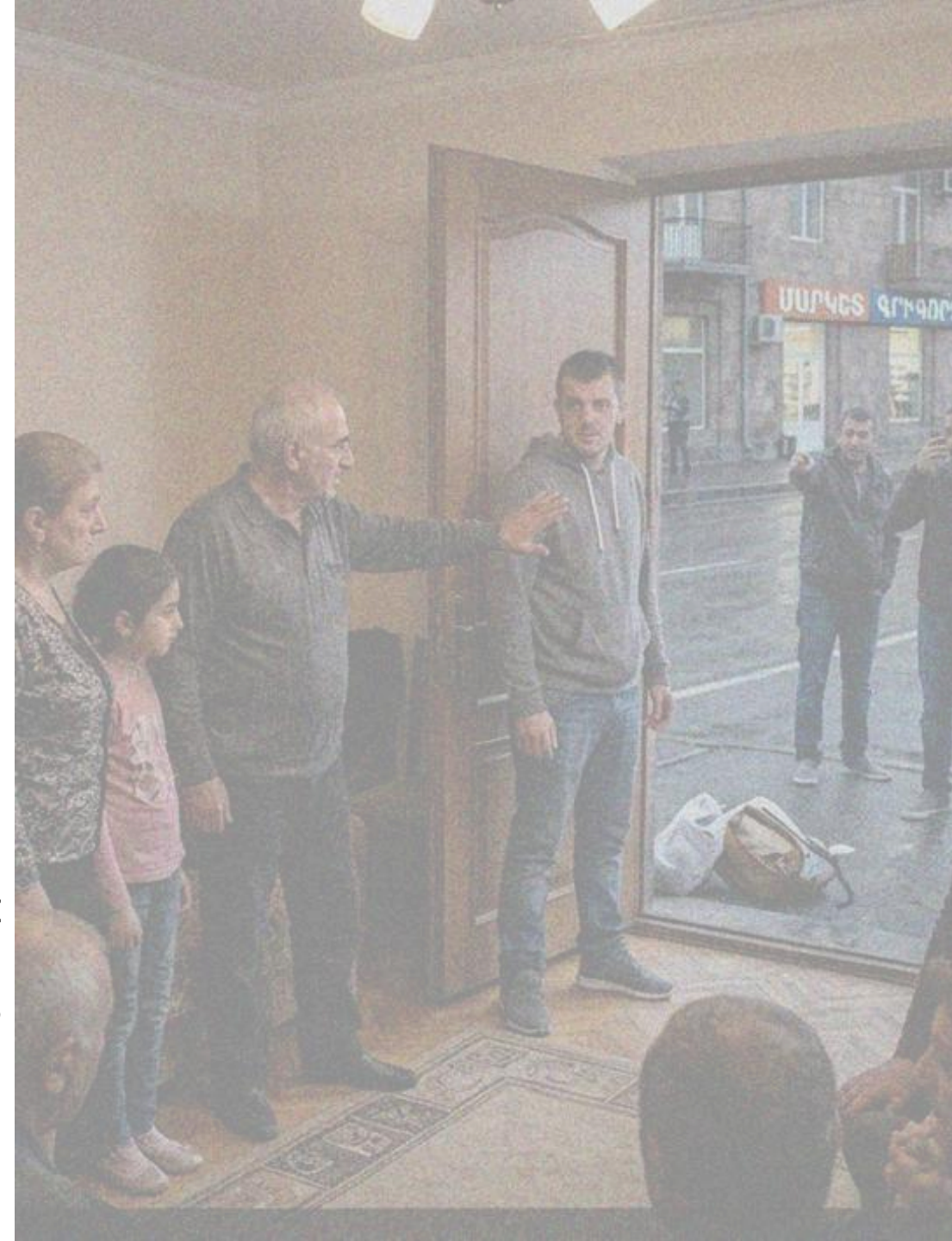
- Rejection and humiliation by relatives and community members
- Disclosure of confidential information
- Social isolation and exclusion
- Psychological harm to children during police actions

Employment Sphere

- Refusal to hire people receiving methadone treatment
- Dismissals linked to stigma or previous drug use history
- Barriers to social reintegration and stable employment

Key Observation

- Criminalization and stigma reinforce each other across law enforcement, healthcare, family, and social environments.



Main Rights Violated

Non-Discrimination

- Differential treatment based on drug use or OAT status

Freedom from Torture and Ill-Treatment

- Physical abuse, humiliation, denial of medical care

Right to Health

- Interrupted treatment, discriminatory healthcare access

Liberty and Security

- Arbitrary detention and unlawful searches

Fair Trial Rights

- Restricted access to legal counsel

Privacy and Family Life

- Disclosure of medical information and family-related harm

Right to Work

- Employment discrimination and exclusion

International Human Rights Framework

Key Standards

- ECHR
- ICESCR
- WHO
- UNODC
- UNAIDS harm reduction guidelines
- UN human rights mechanisms on drug policy

International Best Practices

- Portugal - Decriminalization and public health-centered response
- Switzerland - Harm reduction and heroin-assisted treatment
- Norway - Dignity-based and health-oriented drug policy reforms
- Canada - Supervised consumption services and overdose prevention

Main Lesson

Rights-based and health-centered approaches improve both public health and public safety outcomes.

Conclusions

- Violations against PWUD in Armenia are systemic rather than isolated
- Criminalization and stigma remain central drivers of abuse
- Law enforcement approaches dominate over health and social support mechanisms
- Existing practices conflict with international human rights and medical standards

Recommendations

Law Enforcement

- Limit police discretion and ensure proportionality
- Mandatory human rights training for police

Healthcare

- Guarantee uninterrupted OAT access
- Introduce anti-discrimination and evidence-based medical practices

Social Sphere

- Public awareness campaigns against stigma
- Protection of confidentiality and personal data

Employment and Reintegration

- Develop reintegration and employment support programs for PWUD and former users



State policy on drug use and illicit trafficking in Armenia

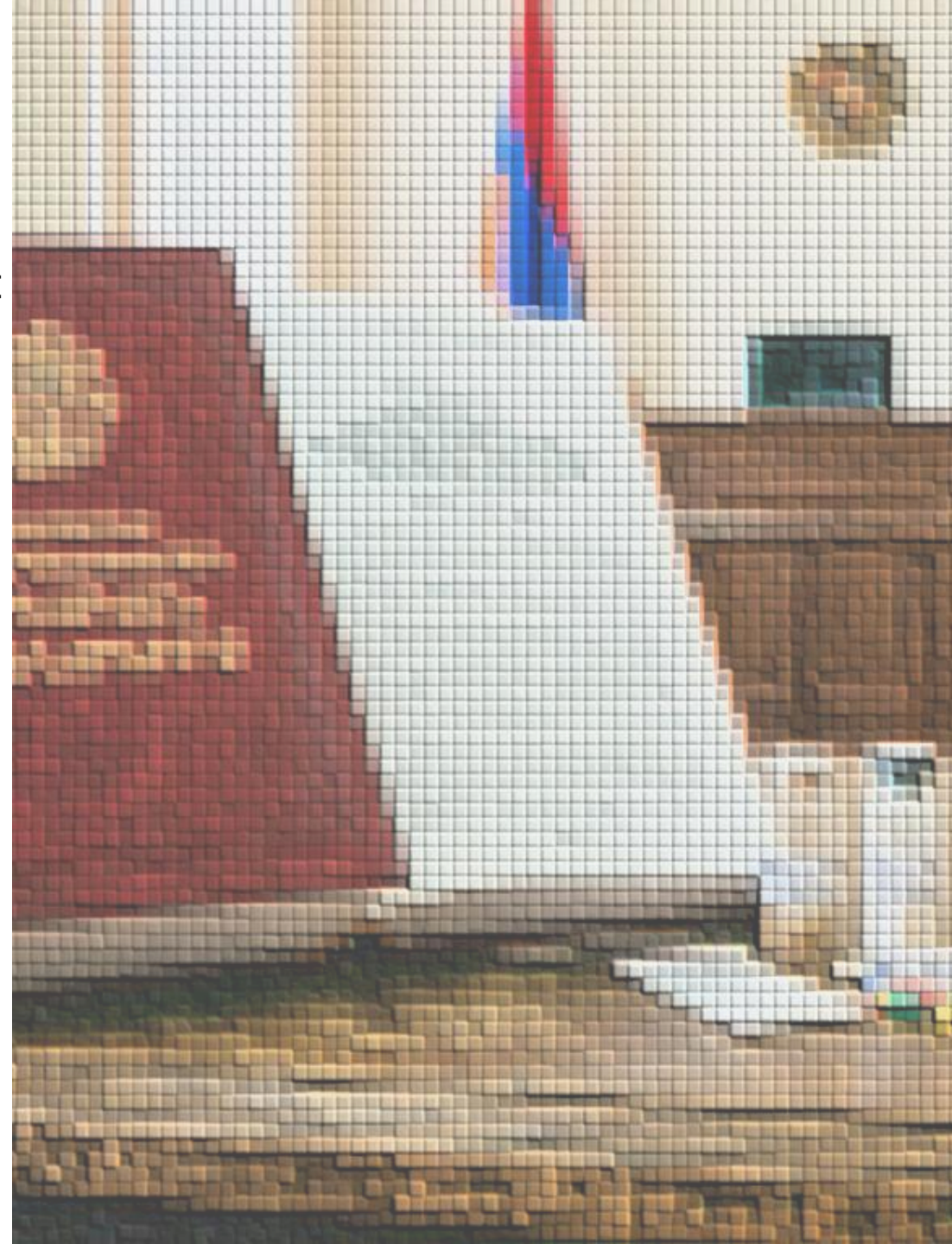
Analysis of legislation and
judicial practice - 2025

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Scope of the Research

- To analyze Armenia's state policy on drug use and illicit circulation without intent to supply
- To assess legislation and judicial practice under Article 396 of the RA Criminal Code
- To evaluate the proportionality and effectiveness of sanctions and quantity thresholds
- To compare Armenian approaches with international standards and foreign best practices
- To assess compliance with public health, human rights, and cost-effectiveness principles



Drug Use Situation in Armenia

Statistical Overview

- In 2024, 7,512 persons were officially registered with drug dependence diagnoses
 - 155 women
 - 5 minors
- Majority aged between 28–49 years
- Estimated number of people who use drugs in Armenia: approximately 14,110
- Significant increase in drug-related offences:
 - +158% between 2018–2022
 - +123.7% between 2022–2023
- Increase in circulation of synthetic and highly dangerous substances



Criminal Cases Under Article 396

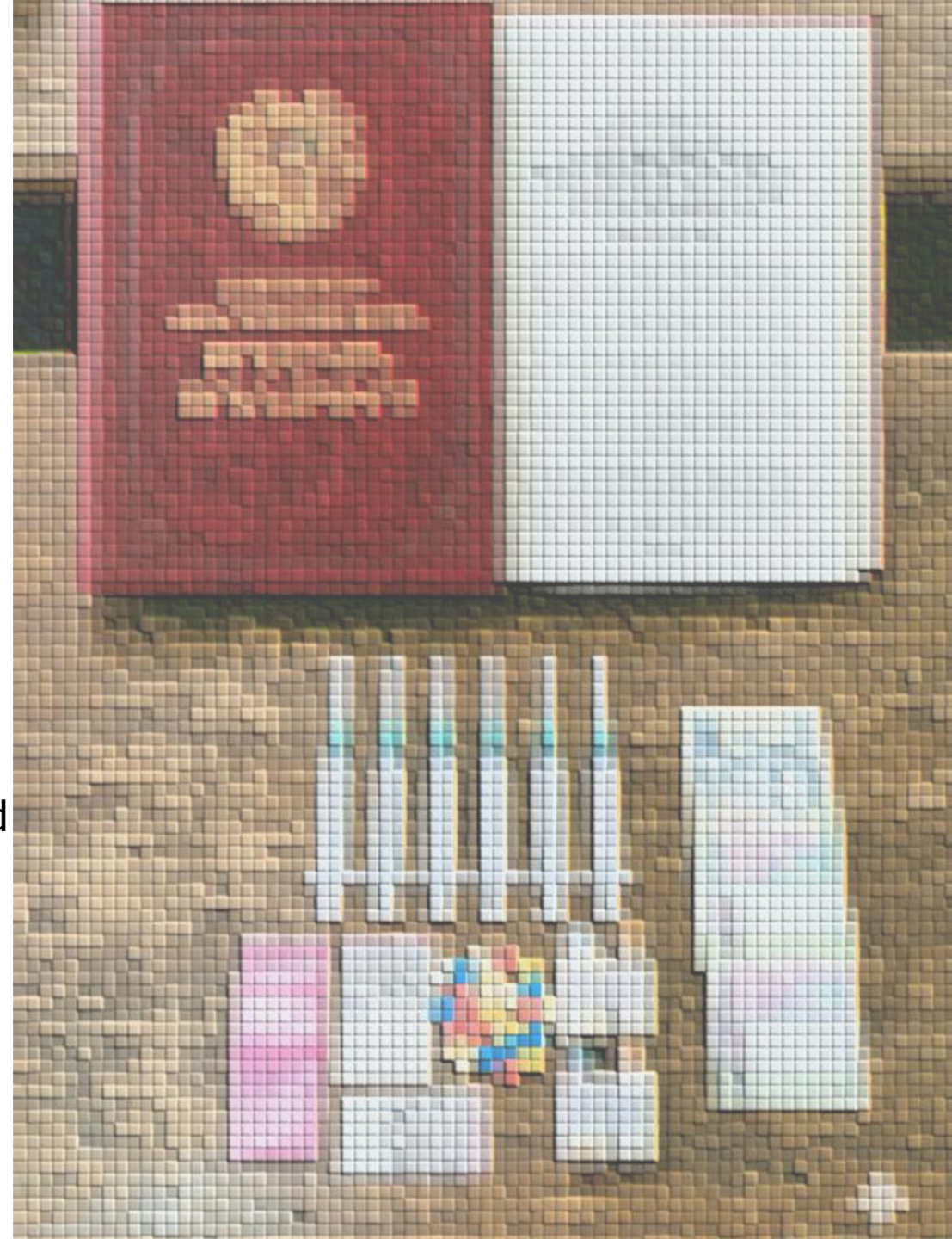
Criminal Proceedings Without Intent to Supply

Cases Referred to Court

- 2022 (2nd half): 141 proceedings / 155 persons
- 2023: 637 proceedings / 703 persons
- 2024: 634 proceedings / 666 persons
- 2025 (1st half): 414 proceedings / 433 persons

Key Findings

- Average annual number of proceedings remains around 650
- Large number of terminated proceedings
- Many cases terminated due to absence of crime
- Significant inconsistencies between official data from state bodies



Sentencing Trends in Armenia

Convictions Under Article 396

Number of Convicted Persons

- 2022: 183 convicted persons
- 2023: 230 convicted persons
- 2024: 433 convicted persons
- 2025 (1st half): 205 convicted persons

Imprisonment Sentences

- Majority of sentences ranged from:
 - up to 2 years
 - 2–3 years
- Trend toward reduced use of actual imprisonment
- Growing use of fines and suspended sentences



International Standards and Human Rights

Human Rights-Based Approach

Relevant International Standards

- ECHR, ICESCR, UN Human Rights Committee standards, WHO and UNODC recommendations

Key Principles

- Drug dependence should be treated as a health condition
- Proportionality in criminal sanctions
- Right to health
- Non-discrimination
- Human dignity
- Access to treatment and rehabilitation

Drug Policies in European Countries (by emcdda.europa.eu)

Decriminalization / Administrative Approaches

- Portugal, Czechia, Italy, Slovenia, Latvia, Belgium, Austria, etc.

Key Trends

- Reduced reliance on imprisonment
- Administrative or health-oriented responses
- Treatment as an alternative to punishment
- Increased diversion away from prison systems

Drug Quantity Thresholds: Armenia vs Europe

Comparative Threshold Analysis

Armenia:

Heroin: 0.03–0.15 g
Cocaine: 0.005–0.025 g
Marijuana: 2.5–12.5 g

Portugal:

- Heroin: up to 1 g
- Cocaine: up to 2 g

Norway:

- Heroin: up to 0.5 g
- Marijuana: up to 10 g

Spain:

- Cannabis: up to 100 g

Conclusion

Armenian thresholds remain comparatively low and punitive.

Judicial Practice Analysis

Analysis of 40 Court Cases (2022–2025)

Most Common Substance

- Marijuana-related offences: 15 cases

Other Substances

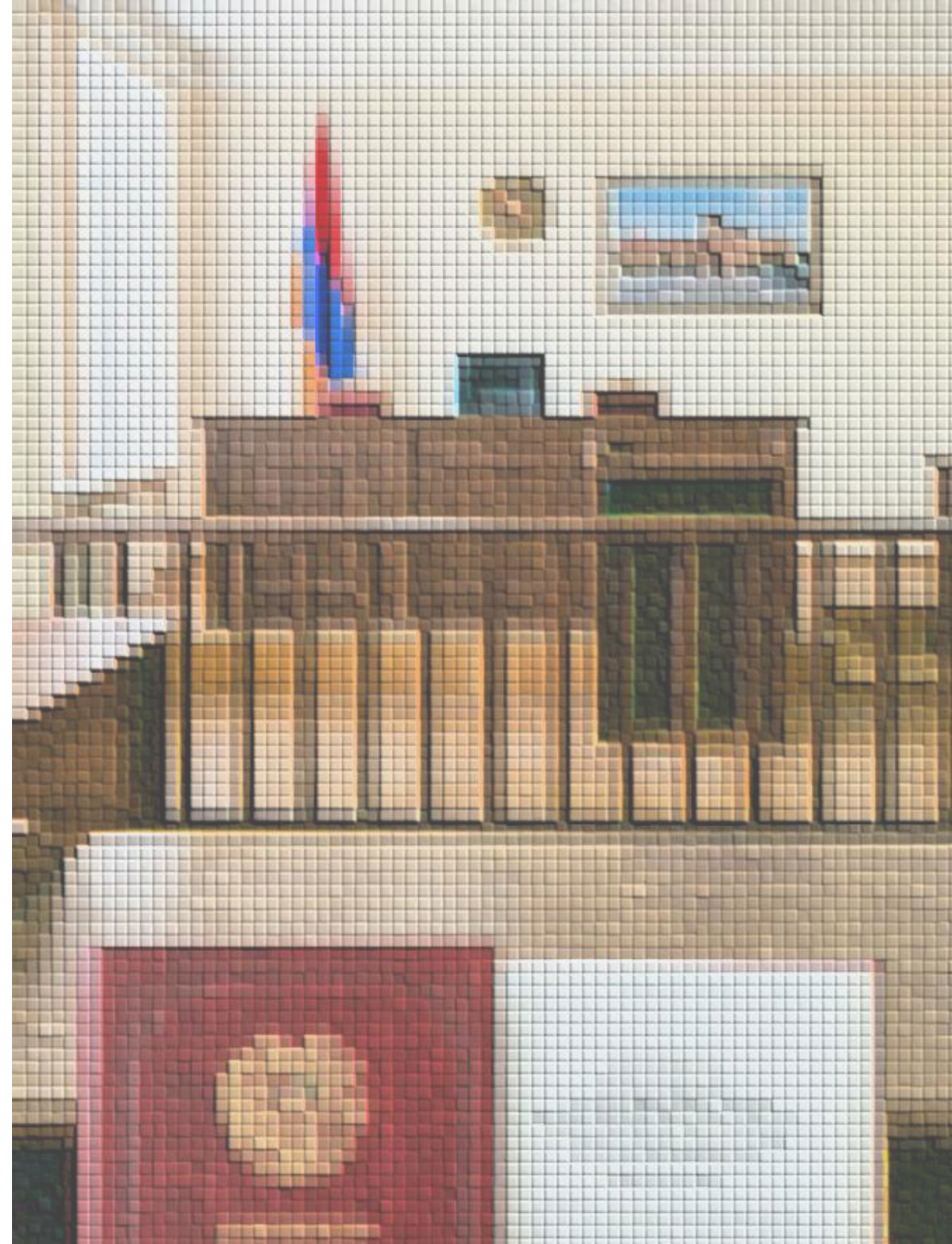
- Methamphetamine, Heroin, Hashish, a-PVP, Cocaine
- Synthetic cannabinoids

Sentencing Outcomes

- Imprisonment imposed in 14 cases
- Actually enforced in only 5 cases
- Fines imposed in 22 cases
- Community service in 2 cases

Critical Concern

- Compulsory treatment imposed in only 1 out of 40 cases
- Judicial practice remains insufficiently health-oriented



Key Conclusions and Policy Gaps

Main Points:

- Armenian drug policy remains predominantly punitive.
- Criminal thresholds remain outdated and inconsistent with international standards.
- Treatment-based alternatives are underutilized.
- Current policy does not sufficiently reflect:
 - public health principles,
 - cost-efficiency,
 - harm reduction,
 - human rights obligations.
- People who use drugs should primarily be viewed as persons in need of healthcare and social reintegration.

Key Message:

A transition from punishment to health-oriented policy is necessary.

Cost-Effectiveness of **Criminalization** vs. **Treatment**

Main Points:

Average daily cost of imprisonment per person in Armenia:

- 2022: approx. AMD 12,800
- 2023: approx. AMD 13,800
- 2024: approx. AMD 13,200
- As of July 1, 2025: approx. AMD 13,120

Annual imprisonment cost per person:

- **AMD 13,120 × 365 = approx. AMD 4,788,800 per year***

Annual methadone maintenance treatment (MMT) cost:

- **AMD 40,000 × 12 = AMD 480,000 per year***

Imprisonment costs are approximately 10 times higher than MMT.

[Note: these indicators are not absolute and naturally require additional calculations].

Key Message:

Current criminal justice responses are financially inefficient compared to health-based treatment approaches.

Key Structural Problems and Conclusion

Systemic Challenges in Armenia

Core Issues

- Criminalized approach to drug use
- Low criminal liability thresholds
- Overreliance on law enforcement
- Insufficient treatment access
- Institutionalized stigma
- Limited rights-based approaches
- Weak integration of public health principles

The current Armenian drug policy remains predominantly punitive, financially inefficient, and insufficiently aligned with international human rights and public health standards.

Treatment, rehabilitation, and reintegration are more effective, more humane, and significantly more cost-efficient than criminalization and imprisonment.

Recommendations

- ✓ **Increase the threshold quantities of narcotic drugs established under the RA criminal code**, so that cases involving low quantities are excluded from the sphere of criminal law;
- ✓ **Systematically and in a rights-based manner apply compulsory treatment measures** (such as MST) as an alternative to criminal liability or as a condition for the conditional suspension of imprisonment, as reflected in the best practices of EU countries, thereby maximizing the cost-effectiveness of public expenditures.



THANK YOU!

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