The Declaration of Argentine Judges, Prosecutors and Public Defenders for Drug Policy that respects Human Rights


1. Conscious that the call of “the war on drugs” has produced worse harm to society than those that supposedly it was called to reduce, it is that the signatories below place in consideration of the public authorities and the society in general the following concepts, understanding that a reform to drug policy is a debt to democracy.

2. The war on drugs and its public policies based on criminalization and repression, have been demonstrated to be a resounding failure in our country and the whole world, without having achieved a decrease in the consumption of psychotropic substances nor effective in pursuit of organized crime, failed in ensuring the right to health of the people who use illegal drugs, nor guaranteeing access for those substances that hold therapeutic or palliative for pain. In the words of the former Secretary General of the Organization of American States (OSA-2013), José Miguel Insulza, “it takes questioning the policies in place until now, under the paradigm of penalization and criminalization, reducing further harm than what they produce” [1].

3. Diverse hemispheric leaders, former Heads of State, academics and representatives of civil society, worried about the impact of the violence affiliated with drugs and the continuous flow of drugs in the region, have promoted the adoption of policies oriented to reduce the importance of criminal justice in its control. Reports emanating from high level groups, such as the Global Commision on Drug Policy [2], emphasizes the need to use harm reduction for the health, security and wellbeing of individuals and

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1 We would like to thank Miranda E. Gottlieb for the translation and her support throughout the campaign. If you have questions, corrections, or comments on the translation, please contact Miranda at mirandaegottlieb@gmail.com
society, favoring the optic of reating the use of drugs as a matter of public health, in reducing the use of drugs with campaigns of prevention based in the evidence and encouraging experimentation with models of legal regulation of certain drugs, among other recommendations.

4. The principal victims of the repressive policies have been the people who use illicit drugs, being constantly persecuted and criminalized for the types of crimes related to drug use, such as possession, cultivation for personal use, consumption with public significance, among others. The State’s waste of enormous quantities of technical resources and economic in the persecution of mere consumers, wasting the resources that should be designated to prevention and care for problematic drug use, and pursuing crimes that affect many and social harm. Despite the lack of official statistics, various reports signal that approximately 70% of the cases that are brought before Federal jurisdiction are the product of the activity of the security forces responding to crimes of drug consumption [3] and only 3% are related to trafficking crimes [4]. “The information from various empirical studies conducted, it is clear that the cases that mostly reach the judicial system are trivial and insignificant, though the consequence is the overpopulation of the prison system, it also has generated unnecessary court use (...) While the courts are saturated with small cases, that those which are not heard are more serious, not only crimes of trafficking or money laundering, but of corruption committed by state officials” [5].

5. On August 29, 2016 marks thirty years of recognized failure of the ruling in “Bazterrica” of the National Supreme Court of Justice, which has laid the jurisprudence foundations of respect and promotion of the human rights of the persons who use illicit drugs. Likewise, it has been seven years (2009) since the same Court newly manifested a liking to not criminalize the consumer (ruling “Arriola” -2009-), declaring the unconstitutionality of the principal figure under which so many people were persecuted and criminalized: the crime of possessing for personal consumption. In spite of all this, the National Congress has not repaired.

6. One of the principal effects of the criminalization of drug users is the dismissal and the ignoring of the impact and effects on health. The law considers the users like delinquents by means of penalization of the crimes associated with consumption, deeming that the majority of drug users do not require help,
attention or care for fear of being found to be criminalized or “treated” compulsively. The National Supreme Court of Justice has said that “it will not punish that same legislator that advocates the obligation of a positive approach to the problem, it can co-exist with another approach that criminalizes unless it generates negative influence on health (...) In a way that it would not be interpreted as criminalization as an inadequate method - when not incoherent and contradictory- when dealing with the problems of them and those they affect. But rather, the penal response ignores the constitutional directives that govern the matter and ignores the true conflict, slowing down, regardless, the full implementation in course of the network of discriminatory guardianship which has driven differential protection. Otherwise, in accordance with such directives and the federal standards that have come into play and begun to delineate them, resulting incomprehensible that among penal sanctions that tend, ultimately, to reaffirmation of the value of certain properties, is completed by restricting precisely what was said to be good. Do this, because who is deemed as a “criminal” - and ignored in his problems, does not attend the health system or stretches to an extreme degree the latency between the beginning of drug use and the request for attention” (“Arriola” 2009).

7. Various regional and international organizations have highlighted the need to tackle the problematic use of substances like a matter of public health, foreign to the criminal approach. For example, the Scientific Committee for the United Nations Office on Drugs and Crime (UNODC), has issued a report intended for the United Nations General Assembly Special Session on drugs (UNGASS 2016), in which it states that “the use of drugs and drug use disorders should be treated as a public health problems in place of criminal justice issues” [7]. The High Commission of the United Nations for Human Rights (OACDH), has said that they have “…identified many ways in which criminalizing drug use and possession impedes the achievement of the right to health” [8]. In turn, the Organization of American States (OAS), mentions that one of the “best practices” is the “decriminalization of possession for personal use in many countries (that does not increase use and has reduced the number of users in the criminal justice system)” [9]. Likewise, it affirmed that “the decriminalization of drug use should be considered as the foundation to any public health strategy. An addict that is chronically ill should not be punished for their addiction, without being treated adequately.” Among other organizations that also have recommended non-criminalization, direct or indirect, of drug users, is found in the World Health Organization (WHO) [10], the United Nations Joint Program on HIV/AIDS (UNAIDS) [11], WHO-Women [12], the University of the United Nations (UNU-UNESCO) [13] and the United Nations Development Program (UNDP) [14]. On a local level it should be noted that the recommendations in the identical sense have been assumed by
the National Institute against Discrimination, Xenophobia, and Racism (INADI) [15], and the Scientific Advisory Committee for the Field of Illicit Narcotic Trafficking, Psychotropic Substances and Complex Criminality [16].

8. As the Organization of American States has recognized, “the evidence suggests that the decriminalization has small incidence in the prevalence (of consumption), though it has the benefit of reducing the quantity of court cases, the criminal records and the rates of incarceration”. In this sense, the Supreme Court has argued that “the trends of use seem to correspond with cultural, economic and social factors, and not with penal intimidation. Moreover, it points to the 2004 Annual Report of the European Drug Monitoring Centre for Drugs and Drug Addiction with headquarters in Lisbon (OEDT) that valued the impact of the legislation in the field of psychotropics, the National Council for Crime of Sweden has concluded that “there were no clear indications that the criminalization of drug use [has had] a deterrent effect on young people.” Likewise, various studies show the complexity around the consumption of narcotics or its commercialization on a small scale. These studies - far from finding legitimacy- show the determined character of the social factors and the scarce possibility of modifying them aside from repressive forms of intervention. [17]. The World Health Organization (WHO) affirms that “… the national strategies of applied drug control that to date have principally included measures of drug consumption reduction that are consisting of the effective prohibition of extra medical consumption of internationally controlled substances and related enforcement initiatives. Therefore, it is necessary to VELAR for the application of a comprehensive set of control methods for drugs that cover the full spectrum of public health interventions- from primary prevention and harm reduction to the attention of disorders provoked by the consumption of drugs, rehabilitation and assistance- and that are based on the fundamental precepts of public health, namely: equity and social justice, human rights and preferential treatment in the countries and populations most needed, with due consideration of economic, social and environmental determinants of health, the interventions based in scientific data and a people centered approach” [18].

9. In the Republic of Argentina there are proceeding institutional advances with respect to the necessity to divide criminal and health authorities in the field of drug policy, since the health system should be prioritized above the penal system in order to meet the demands of the consumers. The paradigm
change will be visible in distinct forms that have been approved in the National Congress through a broad consensus of the political authorities and other arbitrary methods by the National Executive Power. In the first of the cases, it should be mentioned that the Law 26.657 of “Right to Protection of Mental Health” sanctioned and passed in 2010, and approval of the “Comprehensive Plan for the Approach to Problematic Consumption (Plan CPAPC)” through Law 26.934 of 2014. Both standards design the treatment of problematic drug users and addictions, with the axis in public health and the fundamental respect of human rights of people that require these services, denoting a meeting and responsibility of the State in the joint of public policies that dominates the criminal justice system and mandatory treatment. It is necessary to advance with the regulation of the second law mentioned, approved unanimously by the National Congress, providing the fundamental contents that sustaining a public policy approach to problematic drug use, according to its text. It should be noted that the Decree 48/2014 of the National Executive Power, that has come to separate the paradigm of the repressive criminal health paradigm, keeping this last jurisdiction to the SE.DRO.NAR (Secretary of Programming for the Prevention of Drug Addiction and the Fight against Drug trafficking), while that repressive jurisdiction against narcotics trafficking is placed below the orbit of the National Ministry of Security. In 2016, it advanced even more, through the Decree PEN 342/16, which is derived from the jurisdiction over the control and registration of precursor chemicals, from the SE.DRO.NAR to the Ministry of Security. Further away from the legislative and institutional advances, it should be noted that the effective separation between the health paradigm and the criminal paradigm in terms of the approach to the use of prohibited drugs, will not be achieved in its fullness without the reform of Law 23.737 and the repeal of the rules that penalize, directly or indirectly, to the consumers or those who submit to a system of mandatory treatment under threat of criminal sanction.

10. In the budgetary field there exists a general consensus on the world level with respect to the necessity to provide resources for the approach taken towards consumers through strategies of evidence based prevention and scientifically based treatments. It is known to be a more effective to monitor problematic consumers through health and preventive strategies than through criminal repression. However, our country maintains an exorbitant budget that is directed to control the supply of drugs with the rhetoric of the “war on drug trafficking”, at the expense of the resources that would be designated to the field of health and prevention. In agreement with a study [19] of SE.DRO.NAR, in 2011[20] the total amount directed at the drug problem was equivalent to 1.2% of GDP. The 95% of that which dominates the “Drugs Budget” is oriented around the control of supply and hardly 5% is to reduce
demand (4% to treatment and 1% to prevention). The average worldwide is 60%-40%, being that some of the studies were conducted years ago in the United States [21] and later international works, have demonstrated that the methods directed towards reducing demand are seven times more effective than the intended counter approaches to supply. A correct and simple public policy that dissuades and bridges attention to consumers, should be a reconsidered topic.

11. Require comprehensive institutional control of the mechanisms of treatment that are carried out through private entities (many of whom are financed through the State itself), ensuring that the interventions are respectful of human rights of the consumers and are scientifically based in the approach to consumption, and are adjusted to the precepts of regulation which govern the matter (Law 26.943, among others). The mere state funding without a controller, or through the lax exercising of this function, brings the potential for every type of inhumane treatment and degradation of the people who are found under the control of “treatments” developed by a municipality of social actors. The State should not be removed of its function to guarantee access to health for the people with problematic substance use, increasingly how the essential actor in bridging resources to the public effectors of health and delegating this responsibility to the private entities with the scarce or null institutional control over their practices. The imposition of the compulsive methods of treatment, either as a security measure or an alternative to penalty, not only violate the principles of personal autonomy and the current regulations, but has been an ineffective tool in assisting drug users, with statistics referring to these types of interventions as not impeding the incidents of recidivism [22]. That is why the needs of the drug users include a wide range of alternatives in the areas of assistance and treatment, being the admission, a method exceptional and “therapeutic resource of restrictive nature”, of which “only will be performed when provided greater therapeutic benefits as the rest of the achievable interventions in the family, community or social environment” (Law 26.657 of “Right to Protection of Mental Health”).

12. The state agencies should articulate the necessary means to bring persons deprived of liberty with problematic drug use, supplying various comparable models of intervention with regard to attention and care on the basis of diversity, contemplating the contexts in which those who have addictions, their characteristics and the uniqueness of the person. The verified deficit of the organizations in charge of the penitentiary system in the distinct jurisdiction, with regard to prevention, assistance and social
inclusion in relation to the problems of the addictions in secluded places, making indispensable the normalization and coordination of an integrated plan that implies actions that permit the guaranteed protection of drug users health, not only when they are detained, but also when they are freely recuperating, with the maximum respect for their identity, human dignity, and privacy. The deprivation of liberty, far from enabling the weakening of other rights and obligations of public institutions, requires effort of promotion and protection devices. The “Minimum Standard for Treatment of Inmates” (UN) and the “Principles of Medical Ethics (OAS), among other documents, signal a duty to attend to the patients and act in accordance with their best interests, as would there be a moral duty to protect the health of those detained [23].

13. The policy of harm reduction, taken by consensus among various international agencies, and included in the declaration recently passed by the Special Session on Drugs for the United Nations General Assembly (UNGASS 2016), is a policy based in “... initiatives and aimed measures to reduce at the minimum the adverse consequences with drug abuse...”, which manifested as an essential component to the health and treatment driven approaches to consumption. The OAS has affirmed that “there is consensus on the need to provide a comprehensive plan for the hostel treatments of addicts and to implement a series of measures based on harm reduction”. On the local level, this policy is referred to in Law 26.934 of 2014 (Article 10 section d), which says “understand that through harm reduction to those actions which promote the reduction of health risks for an individual and the collective and that have objectively bettered the quality of life for those who suffer from problematic consumption, decreasing the incidence of communicable disease and prevent all other damages associated, including deaths by overdose and accidents”. However, the lack of regulation on a standards is what results in the absence of content, programs and policies aimed to direct public policy as demanded by law. It is necessary to give new meaning to the concept of harm reduction, “that is not reduced to a purely medical concept, but one that pertains to the reduction of violence that the government agencies or the state produces on the population by action or omission” [24].

14. The available statistics show that the provinces that have adhered to the so-called “Law of Defederalization” (Law 26.052), have increased the persecution of consumers by means of the crimes associated with use (200% in some provinces) and obstructed the research capacity of the federal
jurisdiction in the systemic understanding of the phenomenon. Likewise it is observed in some jurisdictions there exists a consolidated trend to choose the most burdensome classification, like those relative to the commercialization of narcotics, instead of figures with better coherence to reality, like to have personal possession and possession for personal use. The criminalization of drug users. Is not only seen increasing, product of defederalization, but the situation is becoming worse by litigation with the application of criminal charges in the higher institution [25]. Currently, within the National Congress there are several legislative proposals that propose to repeal the law of defederalization, considering that there have not been practical results that could be considered beneficial, in both the rights of the consumers and in the persecution of organized crime.

15. The repressive politics has focused on the suppression of the weakest link, the dispensable parts of drug trafficking, principally the most vulnerable people, the so called “mules”. These people are utilized for drug trafficking as a cost effective and disposable part of the business, abused through their condition of poverty and desperation, generally with the individuals found to be subjecting themselves to harassment, extortion, threats, and health risks. The application of the law on human trafficking should be evaluated, in the cases that correspond with the appropriate considerations under the protection of that standard, establishing the lessening of the penalties, alternatives to incarceration, and/or amnesty policies or pardons. These alternatives are essential in reconsidering the necessity and convenience of maintaining a large quantity of people (of whom are majority women crossed with a history of extreme poverty and dire necessity) incarcerated and far away from their families and children. In the case that the prison penalty is to be maintained, in such cases, the possibility should be considered for foreign women to have their sentence carried out in their country of origin, in order to keep contract with her family. In the words of the Ministry of Public Defense and Criminal Prosecution for the Nation, “...in the case that the detained are mothers, the distance becomes as grave for them as for their children. The destruction of mother-child connection constitutes an additional ‘sentence’ added to the series that is also transferred to the children. It is fundamental to place attention to the circumstances that arise for children less than 4 years old who live with their mothers in prison. There is no doubt that a prison is a place absolutely inadequate for the upbringing of children and that there are severe effects produced in the development of their physical, mental and emotional aptitudes. On the other hand, in the cases where there is a separation of children from their mothers, the effects are not less harmful. The state claim that punishing of mothers with the sentence of prison implies the rupture of these mother-child ties and requires the children to be raised without the care and supervision of their
mothers, to stay in the charge of other family members or becomes institutionalized, which sometimes leads to a final rupture of the link” [26].

16. There should be an evaluation of the implementation of the alternatives to incarceration for nonviolent crimes related to drugs, such as retail sale. The majority of these crimes are conducted by people characterized by histories of exclusion, poverty or social or familial violence, a way of subsisting economically and/or obtaining of substances related to their problematic consumption, being used by drug trafficking is a weaker link that is liable to be selected for the criminal justice system. Incarceration tends to increase social exclusion of people and their nuclear family, denoting one of the more reliable reasons for overpopulation of prison in our country and region. Prison reinforces behaviors in accordance to stereotypes of belonging to the illicit market and the impossibility of social inclusion due to stigma and labeling that aggravates personal circumstances. The recidivism within the illicit market is present as it is one of the few possibilities for subsistence of the people who have been locked up, aggravated, and endured the social exclusion and prisonization. The alternatives to prison and the reduction of mandatory minimums (as proposed through various legal projects [27]), have been presented as viable options for alleviating such effects and providing greater flexibility to the system.

17. Before the global failure of the “war on drugs” and its prohibitionist-repressive focus, it was seen as auspicious strategies of regulations of drugs currently banned and as strategies to assume State control, its qualities and monopolization of the value chain, as a “market coup” to the criminal networks. Countries that were mentors of the cross wars and other brother countries, such as the Oriental Republic of Uruguay, have found that evaluating and carrying out strategies of strategic regulation of certain substances (mainly cannabis), in recognition that the repressive approaches have not provided beneficial results to their societies with respect to the rates of consumption, violence, corruption, and mass incarceration for crimes related to prohibition. The assumption that there are no innocuous substances signifies that the presence of the State’s regulation made visible by fundamental and non-extendable monitoring of the markets and not leaving them in the hands of mafia organized crime’s control. As in the case with the regulation of substances which are harmful to health, such as alcohol and tobacco, the taking up of institutional regulatory work provides greater possibility to control the phenomenon of failed prohibition. The Global Commission on DRug Policy has affirmed that “much can
be learned from the successes and failures of the regulation of alcohol, tobacco, drugs, and other products and activities that pose risks to the health of the individual and societies. There is a need for new experiments that permit the legal, but restricted access to drugs that are currently only available illegally (...) Ultimately, the most effective method to reduce the extensive damage caused by the global drug prohibition regime and to promote the objectives of public health and safety is controlled through the responsible, legal regulation of drugs”. Similarly, the OAS has asserted that a “a good perspective would be the acceptance of prohibition has failed and that the experimentation with new political frames should be fostered. This will involve legalization, harm reduction, and the investment in treatment programs; while “tobacco and alcohol provide potentially important lessons for drug prevention programs. In the case of alcohol, higher taxes, restrictions on distribution, and reduction of sale hours, the prohibition of advertising and establishing a minimum age of consumption, among other measures, have proven to be effective in reducing harm”[28].

18. Recently, a group of considerably recognized people from within our country, amidst the signing of the “Convergence Paper” [29], have stated that “given the proven impossibility of achieving a single, relentless and rapid solution to the drug phenomenon it is important to note that the most advisable alternative seems to be to deploy a set of medium and long term initiatives with flexibility. This method of approach should address the problems of each substance according to its own uniqueness and health, social, and economic effects. The development of modulated policy regulation, according to the characteristics of each narcotic, is essential if the aim is to contain and eventually reverse the more deleterious effects of the drug problem. The extension and consideration of legality and statehood should be at the center of any strategy on drugs. Drug trafficking and organized crime feed on the illegality and are strengthened with the state absence. Without law and without State violent actors proper when socially rooted through the mafia regulation of illicit business. The social effects most harmful in the problem of drugs, for example the extreme violence associated with the ownership and control of illegal businesses as well as the corruption and breakdown of public institutions, do not arise as a direct result of the narcotics, but of the failed attempts to eliminate these illegal markets”.

19. The access to the medicinal, therapeutic and palliative uses for pain for currently prohibited substances, should be extended in the field of public policies. The prohibition or difficulty in access to
the substances that benefit comprehensive health for the people who consume them, under the full exercise of the right to health and self-determination, seems to be another rhetorical exercise infused within a prohibitionist culture that has moved away from empathy with those who suffer unnecessarily [30]. The Single Convention of 1961 for Narcotics for the United Nations, temporarily established a limit to prohibitionism in its preamble “recognizing that the medical use of narcotics will continue to be indispensable to mitigating pain and should adopt the necessary measures to ensure the availability of narcotic drugs for this purpose”. The precept is repeated throughout the content in the Convention and its successors of 1971 and 1988. Recently, the International Narcotics Control Board has affirmed that “there still are too many people who suffer or have died with pain, or that do not have access to the necessary medication. The unnecessary suffering through the lack of adequate medication due to the inaction and the excess of the administrative requisites is a situation that we should all be ashamed of”[31]. In our country there exists certain jurisprudence and administrative advances in the recognition of access to prohibited drugs with medicinal, therapeutic and palliative effects on pain. But this is insufficient without the establishment of administrative regulations and legal clarification that guarantees access to the substances for all people who require them, and create scientific research for their uses. The maintaining of obscurantism of certain substances which have tried to be banned, hinders both research on their potential medical and therapeutic uses, and the consideration of alternatives in the treatment of various pathologies, resulting in a widespread involvement of the health of the population.

**Following everything presented, we recommend:**

1. Beginning with legislative debate and approval of law that does not criminalize users of prohibited drugs, through the effective repeal of the types of penalties that directly or indirectly sanction behaviors related to personal drug use (Law 23.737). Among such assumptions, contemplating the repeal of figures such as simple possession, possession for personal use, ostentatious consumption and cultivation for personal use. If chosen to establish a system of thresholds (quantities) to proceed depenalization, they should obey a reality of consumption and market, not establishing trace amounts that do not adjust to reality and permit the continuation of criminal prosecution. The possession of drugs that supersedes the thresholds, should not be
considered as a test for the entire commission of major crimes (commerce, trafficking, etcetera), without accessory testing and complementaries that melt the accusation. International experiences, whose flawed standards of decriminalization have produced antagonistic effects to those intended (cases in Mexico and Brazil, for example).

2. Repeal the compulsive methods of treatment contained in the Law 23.737, for not conforming to the standards in terms of human rights and tackling problematic drug use, according to international and local regulations (Law 26.657 and Law 26.934). The so-called Drug Treatment Courts (DTC) implemented in some countries and normally mentioned in local debate, resulting in improper measures that make enduring threats of criminal or administrative sanctions against consumers, who compelled them to be treated, and wastes administrative and judicial resources that live on past their persecution. Therefore it is unadvisable that continue on with these approaches.


4. Balance the budget assigned to methods surrounding the lessening of demand for the consumption of substances, in line with the granted assignments towards the counteracting of supply.

5. Establish an effective and consistent system of institutional control over the public and private establishments that provide the assistance and treatment for problematic substance use, ensuring that they comply with respect to human rights of the consumer according to the international and local regulations.

6. Articulate the necessary methods to bring to people deprived of liberty with problematic drug use, the supplying of various comparable methods of intervention in the matter of attention and care on the base of diversity, contemplating the contexts for which present addictions, their characteristics and the uniqueness of the person.

7. Develop policies for harm reduction, supplying content operatives to the established public policy and demanded through Law 26.934 (article 10 section d).

9. Consider the possibility of applying the law of human trafficking to the so-called “mules” in your consideration of possible victims, in order to place them below the protection of the law, decrease the penalties, create alternatives to incarceration and policies of amnesty and pardon. In the case that there remains the penalty of imprisonment, it should be contemplated, the possibility, that the foreign women will complete the totality in their country of origin, if at all to conserve contact with their family.

10. Establish alternatives to incarceration and lower the legal minimum sentences for nonviolent crimes related to drugs, like retail sales, to provide proportionality and flexibility to the system.

11. Consider the development of policies for regulation of substances currently prohibited, taking them out of the hands of organized crime networks.

12. Ensure access to the currently prohibited substances, to the people that require them for medical, therapeutic or palliative purposes for pain. Promoting scientific research for the potential medical therapies of these substances.

13. Locate the individuals in the center of the politics of drugs. The legislation should respect the principles of the legality of the criminal law, pro hominem, harmfulness, vexatiousness and proportionality (article 75.22 CN).

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114. GONZÁLEZ DE LOS SANTOS, Cecilia. Defensora de la Defensoría 4 del fuero Contencioso Administrativo y Tributario de la Ciudad Autónoma de Buenos Aires. DNI 24659944


121. IACONO, Lorena Del Valle. Defensora Oficial con competencia en el fuero Penal del Departamento Judicial de Quilmes, Provincia de Buenos Aires. DNI 22.844.185.

122. INVERNIZIO, Yanina. Defensora Pública Oficial de Lomas de Zamora, Provincia de Buenos Aires. DNI 29.462.907.


130. LAGOS, Paula. Defensora de Primera Instancia en lo Penal Contravencional y de Faltas de la Ciudad Autónoma de Buenos Aires. DNI 18.457.520.


132. LAROCCA, Patricia Ana. Jueza de Primera Instancia en lo Penal, Contravencional y de Faltas de la Ciudad Autónoma de Buenos Aires. DNI 22.432.378.


138. LÓPEZ IÑIGUEZ, María Gabriela. Jueza de Primera Instancia de la Ciudad Autónoma de Buenos Aires. DNI 21.452.328

139. LÓPEZ VERGARA, Patricia. Jueza del Juzgado N° 6 Contencioso Administrativo y Tributario de la Ciudad Autónoma de Buenos Aires. DNI 5.617.096.

140. LOUSTEAU, Maria. Defensora Oficial de la Defensoría N° 21 en lo Penal, Contravencional y Faltas de la Ciudad Autónoma de Buenos Aires. DNI 22.822.517.

141. LOZADA, Martín. Fiscal de Cámara de Bariloche, Provincia de Río Negro. DNI 16.823.641.

142. MACEDA, Gabriela Alejandra. Defensora Pública Oficial ante los Juzgados Federales de Primera Instancia de Lomas de Zamora. DNI 22.060.794.
143. MACIEL, Nora Rosana. Defensora de Pobres y Ausentes Nº 2, 1ra Circunscripción, Provincia de Corrientes. DNI 21.646.561.

144. MAHIQUES, Ignacio. Fiscal Nacional en lo Criminal de Instrucción N° 35. DNI 31.618.524.

145. MANES, Silvina. Jueza de la Cámara de Apelaciones en lo Penal Contravencional y de Faltas de Ciudad Autónoma de Buenos Aires. DNI 12.081.040.

146. MARQUIEGUI, Gabriela. Defensora de Primera Instancia Penal, Contravencional y de Faltas de la Ciudad Autónoma de Buenos Aires. DNI 21.613.239.


150. MARTÍNEZ VEGA, María Laura. Jueza Penal Contravencional y de Faltas de la Ciudad Autónoma de Buenos Aires. DNI 18.047.639.


152. MASTRONARDI, José María. Defensor Oficial del Departamento Judicial Quilmes, Provincia de Buenos Aires. DNI N° 13.874.709.


158. MERLINI, Federico Facundo. Juez de Ejecución Penal N° 2 de Quilmes, Provincia de Buenos Aires. DNI 17.901.711.

159. MILLAN, Marcela. Defensora ante la Justicia Penal Contravencional y de Faltas de la Ciudad Autónoma de Buenos Aires. DNI 13.214.526.


163. MOLINA, Rodolfo Marcelo. Fiscal General ante el Tribunal Oral Federal N° 2 de La Plata. DNI 10.111.640.


166. MORALES, Juan Pablo. Juez de la Cámara de Apelaciones en lo Penal y de Exhortos de Catamarca. DNI 18.136.231.


170. NARVAJEA, Sebastián Rodrigo. Fiscal de Circunscripción Rosario, Provincia de Santa Fe. DNI 25.882.035.


172. NEBBI, José Alberto. Fiscal Federal Ad Hoc de Bahía Blanca, Provincia de Buenos Aires. DNI 28.782.127.


175. NIKLIISON, Martín. Fiscal Nacional de la Fiscalía de Instrucción N° 9 de la Ciudad Autónoma de Buenos Aires. DNI 11.773.218.

176. NOGUEIRA, Juan Martín. Fiscal Federal Ad Hoc ante causas por Violaciones a los Derechos Humanos cometidas durante el Terrorismo de Estado, jurisdicción de la Ciudad de La Plata, Provincia de Buenos Aires. DNI 23.485.114.


180. OLAVARRÍA, Gladys Mariela. Jueza Penal de la Circunscripción de Comodoro Rivadavia, Provincia de Chubut. DNI 27.092.158.

181. OLIVA, Ileana. Jueza de Paz y Faltas de La Calera, Provincia de Córdoba. DNI 27.657.532.

182. ORESTE GALLO, Gustavo. Defensor Público Coadyuvante de la Defensoría General de la Nación. DNI 12.888.862.

183. OSIO, Alejandro Javier. Defensor Oficial en lo Penal y de Faltas Provincial La Pampa. DNI 29.162.775.


185. PACCIORETTI, Alejandro. Juez de Responsabilidad Penal Juvenil, Departamento Judicial Quilmes, Provincia de Buenos Aires. DNI N° 16875393


188. PAGANI, Mariana Andrea. Defensora Oficial en lo Penal de Lomas de Zamora, Provincia de Buenos Aires. DNI 28.280.228.
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205. POSSE, Verónica. Fiscal del Joven de Necochea, Provincia de Buenos Aires. DNI 23.122.190.


208. RAMOS, María Ángeles. Fiscal Federal de la Unidad de Asistencia para causas por Violaciones a los Derechos Humanos durante el Terrorismo de Estado. DNI 26.107.348.


210. RECABARRA, Marina. Defensora de Primera Instancia en lo Penal, Contravencional y de Faltas de la Ciudad Autónoma de Buenos Aires. DNI 21.040.239.


217. RUIZ, Alicia. Jueza del Tribunal Superior de la Ciudad Autónoma de Buenos Aires. DNI 5.204.687.


220. SAIDMAN Sandra, Jueza del Juzgado de Faltas de Barranqueras, Provincia del Chaco. DNI 18.450.745.


226. SARMIENTO, Miguel Sebastián. Juez del Juzgado de Ejecución Penal N° 1, Provincia de Mendoza. DNI 25.034.843.


234. SOLÁ, Benjamín. Defensor Oficial Coadyuvante Unidad de Ejecución de las Penas de las Provincias de Salta y Jujuy. DNI 22.785.408.


237. STOLTE, Federico Enrique. Defensor de Primera Instancia Penal Contravencional y de Faltas de la Ciudad Autónoma de Buenos Aires. DNI 13.211.141.


239. TAPIA, Juan Francisco. Juez de Garantías de Mar del Plata, Provincia de Buenos Aires. DNI 23.224.094.


241. TAVOSNANSKA, Norberto Ricardo, Juez de Primera Instancia Penal Contravencional y Faltas, Ciudad Autónoma de Buenos Aires. DNI 8.607.655.


251. VEGA, Flavia Gabriela. Defensora Pública Oficial ante los Juzgados Nacionales de Ejecución Penal. DNI 23.103.745.


254. VIANO CARLOMAGNO, María Marcela. Jueza Nacional en lo Civil de Primera Instancia. DNI 17.364.701.

255. VIAZZI, Mónica. Fiscal Penal y Contravencional de la provincia de Salta. DNI 17.459.140.

256. VICECONTE, Mariela Cecilia. Fiscal del fuero de la Responsabilidad Penal Juvenil del Departamento de Azul, Provincia de Buenos Aires. DNI 23.166.428.


258. VILLATTE, Adolfo Raúl. Fiscal General Titular de la Unidad de Asistencia para causas por Violaciones a los Derechos Humanos cometidos durante el Terrorismo de Estado, jurisdicción Rosario, Provincia de Santa Fe. Ex titular de la Procuraduría de Narcocriminalidad de la Procuración General de la Nación. DNI 18.339.876.


265. ZUCCONI, Karina Mariana. Jueza del Juzgado Nacional en lo Criminal de Instrucción No. 15. DNI 22.982.050

[2] Notably, some of the members of the Commission: Kofi Annan. President of the Kofi Annan Foundation and former Secretary General of the United Nations, Ghana; Louise Arbour. Former High Commissioner of the United Nations for human rights, Canadá; Pavel Bém. Former Mayor of Prague, Czech Republic; Richard Branson. Entrepreneur, activist for social causes, founder of the Virgin Group, co-founder of The Elders, United Kingdom; Fernando Henrique Cardoso. Ex-President of Brazil (Chair); Maria Cattaui. Former Secretary General of the International Chamber of Commerce, Switzerland; Ruth Dreifuss. Former Minister of Social Affairs and former President of Switzerland; Cesar Gaviria. Former President of Colombia; Asma Jahangir. Activist of human rights, former special coordinator of the UN on executions extrajudicial, summary or arbitrary, Pakistan; Michel Kazatchkine. Special Envoy of the Secretary General of the UN for HIV/AIDS in Eastern Europe and Central Asia, and former Executive Director of the Global Fund to fight AIDS, Tuberculosis and Malaria, France; Aleksander Kwasniewski. Former President of Poland; Ricardo Lagos. Former President of Chile; George Papandreou. Former Prime Minister of Greece; Jorge Sampaio. Expresidente de Portugal; George Shultz. Former Secretary of State, United States (Honorary Chair); Javier Solana. Former High Representative for Foreign and Security Policy for the European Union, Spain; Thorvald Stoltenberg. Former Minister of Foreign Affairs, High Commissioner of the UN refugee agency, Norway; Mario Vargas Llosa. Writer and public intellectual, Perú; Paul Volcker. Former President of the United States Federal Reserve and the Economic Recovery Advisory Board. United States; John Whitehead. Former Deputy Secretary of State, former co-Chairman of Goldman Sachs & Co., President and Founder of the 9/11 Monument and Museum, United States; Ernesto Zedillo. Former President of Mexico. See http://www.globalcommissionondrugs.org/


[5] Reference. Oporto Declaration. A group of judges from different counties gathered in Oporto, Portugal, signed the Declaración de Oporto which they designated "policies on drugs have proven to be a resounding failure, since they have not achieved the intended purposes of the decrease of the consumption of narcotic substances as they have not come to criminalize large criminal organization". Available at http://www.druglawreform.info/index.php?option=com_flexicontent&view=items&id=450:declaracion-de-oporto&Itemid=99


[20] They do not exist in the most recent studies.


[27] Such decrease agrees with the proposals made by members RICARDO GIL LAVEDRA, MANUEL GARRIDO, ESTELA RAMONA GARNERO, RICARDO LUIS ALFONSIN, in the project No. 0981-D-2012, which takes up the presentation made in the year 2010 by the members ALFONSIN, ALBRIEU, CHEMES, FIAD and the Member STORANI. In the exhibition of reasons for the project, it mentions that the initiative
proposes “the modification of article 5 of the law 23.737 in order to attenuate the minimum criminal standards that usually falls inequitably on the marginalized social sectors and distract efforts and human resources for the research of others behaviors which are more severely pursued (...)” “We cannot forget that the selectivity of our own penal system generates criminal consequences that fall almost exclusively on those sectors more vulnerable to these criminal organization, that usually become involved due to economic need. Setting a minimum of 4 years, prevents an imposition of conditional sentencing, the system loses the necessary flexibility to adjust the penalty in relation to the degree of guilt each subject has, and this picture suggests that the appropriateness of a minimum of 3 years is used to avoid situations of overcrowding and overpopulation and the imposition of sanctions that are in determined cases will manifest unjustly.” It fits to remember at the same time the LAW PROJECT OF REFORM, UPDATES AND INTEGRATES THE NATIONAL CRIMINAL CODE, establishing some of the crimes contained in article 5, a decrease to both the minimum of the criminal scale (from 4 to 3 years of prison), and of the maximum (from 15 to 10 years). This is to safeguard the principle of criminal proportionality and the harmonization with the integrity of criminal reform proposed. Finally, the then Senator ANIBEL FERNANDEZ had established an aggravating factor for such crimes which “... correspond with the actions of a national or transnational organized crime group”, and a penalty “... of three (3) to ten (10) years in the remaining cases” (referenced Project Number 750-2012).


