



Leitner Center

for International Law and Justice
AT FORDHAM LAW SCHOOL, NEW YORK CITY

**Universal Periodic Review – China
Stakeholder Submission by the Leitner Center for International Law and Justice
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I. STAKEHOLDER INTRODUCTION

The Leitner Center for International Law and Justice at Fordham Law School works to strengthen rule of law and human rights protections for vulnerable populations worldwide. In particular, in cooperation with in-country partners, the Leitner Center works extensively with civil society organizations to support and empower vulnerable populations in the People’s Republic of China (“China”). Drawing upon the expertise and documentation of China-based partners as the basis for analysis and recommendations, the Leitner Center respectfully presents this Stakeholder Submission in advance of China’s upcoming Universal Periodic Review (“UPR”).

II. SUMMARY

For certain vulnerable populations in China, stigma and discrimination pose substantial barriers to full realization of their human rights. Although the Chinese government has taken positive steps to implement past UPR recommendations towards human rights universality, three critical vulnerable populations—**sex workers, people living with HIV, and people who use drugs**—remain persistently prevented from enjoying lives of ever-greater dignity, freedom, and well-being.¹ Specifically, while the government has made commendable efforts towards UPR commitments in the critical areas below, genuine implementation must ensure full realization of human rights for all vulnerable populations.

➤ **Freedom from Discrimination, Including Equal Access to Health and Employment**

The government has accepted past UPR recommendations to combat discrimination against vulnerable populations in access to health and employment, including commitments “to improve its health infrastructure, including access to health services especially for vulnerable groups”², to “strengthening guarantees of social and economic rights of citizens, in particular in the area of ... health care, social protection and labour” with “special attention to the vulnerable groups”³; and to “include prohibition of discrimination of any kind, including discrimination based on sexual orientation and gender identity ... and infection with HIV, in labour and employment law in line with international standards.”⁴

Despite these positive steps, critical vulnerable populations still face discriminatory barriers in accessing health services and employment. **To fully realize its past UPR commitments to end discrimination in access to health and employment, the government must ensure that ongoing implementation efforts fully address the barriers to access faced by sex workers, people living with HIV, and people who use drugs.**

➤ **Freedom from Arbitrary Detention and Torture and Other Ill-Treatment**

The government has accepted past UPR recommendations to abolish “systems of arbitrary detention,” including the “Re-education Through Labour” (“RTL”) system, and to “[e]nsure that any reformed prison or compulsory care system meets international human rights standards.”⁵ In addition, because arbitrary detention creates conditions for torture and other ill-treatment, the government has accepted UPR recommendations to implement “institutional mechanisms to ensure the enforcement of existing laws prohibiting torture.”⁶

Despite these positive steps, and despite formal abolition of RTL in December 2013, critical vulnerable populations still experience disproportionate arbitrary detention in systems bearing striking resemblance to RTL. In particular, sex workers and people who use drugs are disproportionately detained in China’s problematic “Custody and Education” (“C&E”) and “Compulsory Isolated Treatment (“CIT”) systems, respectively, and face heightened risks of torture and other ill-treatment.⁷ **To fully realize its past UPR commitments to end arbitrary detention and torture and other ill-treatment, the government must ensure that ongoing implementation efforts fully address arbitrary detention and torture risks faced by sex workers, people living with HIV, and people who use drugs.**

➤ **Human Rights Training for Government Employees**

The government accepted past UPR recommendations to implement human rights training and awareness raising for all government employees.⁸ In its commitment to making human rights education a core element of its human rights action strategy, the government has also promised to deliver rights-based education to justice system actors—including law enforcement officials—as well as public servants who provide healthcare services.⁹

Despite these positive steps, China’s government employees —particularly those in law enforcement and healthcare settings—lack an understanding of fundamental human rights of critical vulnerable populations. **To fully realize its past UPR commitments to implement human rights training to all government employees, the government must ensure these programs directly address the realities faced by sex workers, people living with HIV, and people who use drugs.**

III. ANALYSIS AND RECOMMENDATIONS

Drawing upon the first-hand expertise and documentation of China-based civil society organizations, the following analysis examines realities faced by critical vulnerable populations in China and provides the basis for 12 recommendations to ensure that implementation of past UPR commitments includes the full realization of human rights for all—including sex workers, people living with HIV, and people who use drugs.

A. SEX WORKERS

In China, stigma surrounding sex workers results in social marginalization, which increases vulnerability to human rights abuses and contradicts public health objectives to prevent HIV and other sexually transmitted infections (“STIs”). Moreover, the illegality of sex work under Chinese law forces this community underground, which hides discrimination and abuse from public view and prevents both human rights and public health accountability.¹⁰

➤ Freedom from Discrimination, Including Equal Access to Health and Employment

Sex workers require adequate access to critical health services, in part due to higher exposure to HIV and other STIs. However, China’s legal landscape, combined with pervasive stigma, profoundly restricts sex workers’ access to HIV and sexual reproductive health services.¹¹ This is especially true for transgender sex workers, who have specific needs for gender-affirming health care and specifically targeted HIV prevention and treatment services.¹²

Particularly troubling is the law enforcement practice of seizing condoms as evidence of illegal sex work and the basis for administrative penalties.¹³ Sex workers are therefore unfairly targeted for severe punishment simply for trying to protect themselves and their clients against STIs.¹⁴ Notably, this practice contradicts China’s positive efforts to promote condoms as an STI prevention tool.¹⁵ Conflicting policies that both promote and punish condom use not only discriminate against sex workers in healthcare access, but also undermine China’s public health priorities.¹⁶

RECOMMENDATION 1: Enact frameworks allowing sex workers to enjoy safe working conditions, including access to appropriate, quality health services, with specific attention to needs of transgender sex workers for gender-affirming health services and targeted HIV prevention and treatment.

RECOMMENDATION 2: Implement or amend relevant guidelines to instruct law enforcement officers to cease practice of using condom possession as evidentiary basis to detain, arrest, or otherwise punish persons suspected of sex work.

➤ **Freedom from Arbitrary Detention and Torture and Other Ill-Treatment**

Sex workers and their clients face arbitrary detention by police for up to fifteen days under China's Administrative Punishment Law, and under the C&E system for six months to two years—all without judicial oversight or due process.¹⁷ Accordingly, C&E detainees have no recourse to detainee protections otherwise guaranteed under Chinese law.¹⁸ C&E centers subject detainees to long hours of uncompensated labor, as well as forced physical examinations and medical testing. Moreover, circumstances of arbitrary detention such as C&E create conditions conducive to torture and ill-treatment of sex workers, and in the case of involuntary medical testing, may itself constitute torture.¹⁹

RECOMMENDATION 3: Enact a moratorium halting any further admission of sex workers into C&E centers, close down all C&E centers for sex workers and their clients without delay, and release individuals currently detained in C&E Centers

➤ **Human Rights Training for Government Employees**

Given their illegal status, sex workers are disproportionately exposed to mistreatment by law enforcement, including physical violence, coerced confessions, and discrimination when seeking to report crimes or abuse.²⁰ A culture of impunity undermines sex workers' access to justice and normalizes abuse and discrimination against sex workers.²¹ Law enforcement officials require better awareness and understanding of the fundamental rights of sex workers to live free from violence and discrimination.

RECOMMENDATION 4: Implement human rights training programs aimed at law enforcement officers to better understand the realities faced by sex workers, emphasizing prohibitions against police violence, coerced confessions, and discrimination in reporting of abuses, along with increased training for law enforcement on HIV-prevention and care policies for sex workers.

B. PEOPLE LIVING WITH HIV

Stigmatization of people living with HIV in China can leave members of this vulnerable population living on the margins of society, facing discrimination in both private and public life.²² In particular, people living with HIV can face significant obstacles to equal access to health care and employment.²³ Discrimination is often accompanied by a profound lack of understanding of the basic rights of people living with HIV among those who engage them directly, including government employees in healthcare and law enforcement.

➤ **Freedom from Discrimination, Including Equal Access to Health and Employment**

In China, HIV-based discrimination prevents people living with HIV from enjoying equal access to health and employment. Regarding health, discrimination resulting from HIV-related stigma remains a critical barrier to HIV prevention and treatment. Those seeking treatment from general hospitals report routine denials of service, differential and segregated medical treatment, and arbitrarily-imposed fees.²⁴ Regarding employment, individuals whose HIV status is disclosed to employers may face termination as a result.²⁵ Making matters worse, stigma and discrimination is perpetuated by government policies that designate people living with HIV as “unqualified” for civil service work in the public sector.²⁶

Notably, China’s 2006 Regulation on AIDS Prevention and Treatment explicitly prohibits discrimination against people living with HIV.²⁷ However, this administrative framework lacks meaningful enforcement or accountability mechanisms, and remains subject to overriding laws that reinforce discrimination against people living with HIV.²⁸ While advocates have had success strengthening legal protections for people living with HIV, discrimination in both private and public actors remains widespread.

Discriminatory policies at healthcare facilities also violate fundamental physical integrity and privacy rights. HIV testing is frequently performed without patient consent, in violation of international norms.²⁹ This includes non-consensual testing of sex workers and others “who may be transmitting AIDS,” as well as detainees in administrative detention.³⁰ Moreover, involuntary testing is frequently followed by non-consensual disclosure of HIV status to others, which can lead to refusal of treatment by healthcare providers, loss of employment, and rejection by family members.³¹

RECOMMENDATION 5: Enact mechanisms to enforce anti-discrimination provisions in the 2006 Regulations on AIDS Prevention and Treatment, including procedures allowing people living with HIV to seek access to justice for discrimination in access to health and employment.

RECOMMENDATION 6: Continue efforts to fully realize fundamental rights to equal access to health and employment by directly addressing people living with HIV in anti-discrimination laws and policies, including stronger laws prohibiting discrimination against people living with HIV by health care providers and employers, and reform of policies designating people living with HIV as “unqualified” for public sector employment.

RECOMMENDATION 7: Take steps to prohibit involuntarily HIV testing and involuntary disclosure of HIV status by government employees to third parties, including employers.

➤ **Freedom from Arbitrary Detention and Torture and Other Ill-Treatment**

Given higher HIV rates among sex workers and people who use drugs, people living with HIV disproportionately experience arbitrary detention and circumstances conducive to torture and other ill-treatment under C&E and CIT administrative detention. As outlined in **RECOMMENDATION 3** and **RECOMMENDATION 11**, the government must end the practice of arbitrary detention and torture and other ill-treatment by abolishing C&E and CIT administrative detention systems.

➤ **Human Rights Training for Government Employees**

Reports of widespread stigma-based discrimination among government employees—including health care providers, law enforcement officials, and others who engage vulnerable populations—underscore a critical lack of awareness and understanding of the fundamental human rights of people living with HIV.

RECOMMENDATION 8: **Implement rights-based training programs aimed at government employees who engage people living with HIV, including health care providers, law enforcement officials, and others who engage vulnerable populations, emphasizing the fundamental rights and specific needs of people living with HIV.**

C. PEOPLE WHO USE DRUGS

In China, stigmatization of people who use drugs results in drug policy responses that are based on punishment and coercion, rather than evidence-based, comprehensive harm reduction services to prevent and treat drug dependence.³² This punitive and stigmatizing approach leads to substantial human rights violations, including disproportionately high rates of discrimination and arbitrary detention of people who use drugs.

➤ **Freedom from Discrimination, Including Equal Access to Health and Employment**

Based on stigmatized perceptions of people who use drugs as threats to social stability, China's law enforcement approach to drug policy focuses on punishment and isolation of drug users from their communities, which hinders evidence-based, comprehensive harm reduction services and creates the circumstances for widespread discrimination. For example, under the national Dynamic Control System ("DCS")—a registration system monitoring location and movement of previously convicted or detained people who use drugs—routine, daily activities can trigger law enforcement notification of an individual's presence in the community, which often leads to drug users being called in for questioning by local police.³³ Practically speaking, this means every time a DCS registrant applies for employment, is admitted to a hospital, or checks into a hotel or airline, they risk being called in for police questioning. Not only does this substantially disrupt recovery and reintegration of drug users into society, it can also lead to discrimination in access to public services and employment.

RECOMMENDATION 9: Adopt and implement evidence-based, comprehensive harm reduction services to adequately prevent and treat drug dependence among people who use drugs, thereby reducing discriminatory barriers to access to healthcare and employment.

RECOMMENDATION 10: Reform the DCS system to ensure protection of the right to privacy and freedom from discrimination for people who use drugs, including ending compulsory registration, surveillance, random interrogation, and forced drug testing.

➤ **Freedom from Arbitrary Detention and Torture and Other Ill-Treatment**

Under Chinese law, those convicted of drug possession and use can be sentenced without judicial oversight or due process to administrative detention in “drug rehabilitation centers” under the CIT system.³⁴ While in CIT, detainees rarely receive adequate healthcare or treatment, and are subjected to forced labor and physical violence perpetrated by supervising employees.³⁵ Additionally, while being weaned off drugs, CIT detainees are also subject to strenuous physical activity, denied critical medication or pain relief, and rarely offered counseling.³⁶ Many of these circumstances—including the potential abuse by detention center authorities of the severe pain and suffering caused by drug withdrawal experienced by detainees—may also be defined as torture or ill-treatment under international norms, as has been noted by UN experts.³⁷

RECOMMENDATION 11: Enact a moratorium halting any further admission of into CIT and other compulsory administrative detention centers, close down all compulsory administrative detention centers for people who use drugs without delay, and release currently detained individuals.

➤ **Human Rights Training for Government Employees**

Under current laws, CIT and other compulsory administrative detention centers for people who use drugs are operated by public security and law enforcement personnel. These individuals are legally authorized to make medical treatment determinations, often without any communication or coordination with public health officials on effective medical care.³⁸

RECOMMENDATION 12: Implement human rights-based training programs directly aimed at civil servants who engage people who use drugs, including public security and law enforcement officials authorized to operate administrative detention centers, emphasizing the fundamental rights and specific medical needs of people who use drugs.

IV. CONCLUSION

For sex workers, people living with HIV, and people who use drugs in China, stigma and discrimination continue to pose obstacles to full realization of fundamental human rights. While the Chinese government has taken commendable steps to implement UPR recommendations towards human rights universality, genuine implementation must focus on full human rights realization for all vulnerable populations—including sex workers, people living with HIV, and people who use drugs. Specifically, as outlined in the 12 targeted recommendations outlined above, the Chinese government must ensure that its human rights commitments extend fully to vulnerable populations in three critical areas:

➤ **Freedom from Discrimination, Including Equal Access to Health and Employment**

To fully realize its past UPR commitments to end discrimination in access to health and employment, the government must ensure that ongoing implementation efforts fully address the barriers to access faced by sex workers, people living with HIV, and people who use drugs. (See **RECOMMENDATIONS 1, 2, 5, 6, 7, 9, and 10.**)

➤ **Freedom from Arbitrary Detention and Torture and Other Ill-Treatment**

To fully realize its past UPR commitments to end arbitrary detention and torture and other ill-treatment, the government must ensure that ongoing implementation efforts fully address arbitrary detention and torture risks faced by sex workers, people living with HIV, and people who use drugs. (See **RECOMMENDATIONS 3 and 11.**)

➤ **Human Rights Training for Government Employees**

To fully realize its past UPR commitments to implement human rights training to all government employees, the government must ensure these programs directly address the realities faced by sex workers, people living with HIV, and people who use drugs. (See **RECOMMENDATIONS 4, 8, and 12.**)

NOTES

¹ In the spirit of the Chinese government’s clear statements that it “respects the principle of universality of human rights” and “works to ensure that every citizen enjoys a life of ever-greater dignity, freedom and well-being,” its implementation of past UPR commitments must reflect full realization of human rights for all—including vulnerable populations of sex workers, people living with HIV, and people who use drugs. UN Human Rights Council, Working Group on the Universal Periodic Review, China, National Report, UN Doc. A/HRC/WG.6/17/CHN/1* (Aug. 5, 2013) (hereinafter referred to as “2013 China UPR National Report”), para. 4-5, available at <https://documents-dds-ny.un.org/doc/UNDOC/GEN/G13/169/58/PDF/G1316958.pdf>.

² UN Human Rights Council, Report of the Working Group on the Universal Periodic Review, China, UN Doc. A/HRC/11/25 (Oct. 5, 2009), para. 114.20, available at <https://documents-dds-ny.un.org/doc/UNDOC/GEN/G09/162/99/PDF/G0916299.pdf>.

³ UN Human Rights Council, Report of the Working Group on the Universal Periodic Review, China, Addendum: Views on Conclusions and/or Recommendations, Voluntary Commitments and Replies Presented by the State Under Review, UN Doc. A/HRC/25/5/Add.1 (Feb. 27, 2014) (hereinafter referred to as “2013 China UPR Outcome Addendum”), p. 14, available at <http://www.ohchr.org/EN/HRBodies/UPR/Pages/CNIndex.aspx>, citing UN Human Rights Council, Report of the Working Group on the Universal Periodic Review, China, UN Doc. A/HRC/25/5 (Dec. 4, 2013) (hereinafter referred to as “2013 China UPR Outcome Report”), para. 186.183, available at <https://documents-dds-ny.un.org/doc/UNDOC/GEN/G13/188/55/PDF/G1318855.pdf>.

⁴ 2013 China UPR Outcome Addendum, *supra* note 3, p. 7, citing 2013 China UPR Outcome Report, *supra* note 3, para. 186.90.

⁵ 2013 China UPR Outcome Addendum, *supra* note 3, p. 10, citing 2013 China UPR Outcome Report, *supra* note 3, para. 186.118. See also 2013 China UPR Outcome Report, para. 186.117, recommending abolition of RTL, which the Chinese government also accepted.

⁶ 2013 China UPR Outcome Addendum, *supra* note 3, p. 5, citing 2013 China UPR Outcome Report, *supra* note 3, para. 186.51.

⁷ See Asia Catalyst, “CUSTODY AND EDUCATION”: ARBITRARY DETENTION FOR FEMALE SEX WORKERS IN CHINA (Dec. 2013) (hereinafter referred to as “CUSTODY AND EDUCATION”), available at www.asiacatalyst.org/wp-content/uploads/2014/09/AsiaCatalyst_CustodyEducation2013-12-EN.pdf; Patrick Tibke, *Drug Dependence Treatment in China: A Policy Analysis*, INTERNATIONAL DRUG POLICY CONSORTIUM, 7-10 (February 2017), available at http://fileservr.idpc.net/library/IDPC-briefing-paper_China-drug-treatment.pdf; and United Nations Development Program (hereinafter referred to as “UNDP”), THE POLICY AND LEGAL ENVIRONMENTS RELATED TO HIV SERVICES IN CHINA, 33-36 (2015), available at http://www.cn.undp.org/content/china/en/home/library/democratic_governance/the-policy-and-legal-environments-related-to-hiv-services-in-china.html. See also Stanley Lubman, *Arrested, Detained: A Guide to Navigating China’s Police Powers*, WALL ST. J. (Aug. 12, 2014), <https://blogs.wsj.com/chinarealtime/2014/08/12/arrested-detained-a-guide-to-navigating-chinas-police-powers/>; John Ruwitch, *A Jail By Another Name: China Labor Camps Now Drug Detox Centers*, REUTERS (Dec. 2, 2013), <https://www.reuters.com/article/us-china-camps/a-jail-by-another-name-china-labor-camps-now-drug-detox-centers-idUSBRE9B10CQ20131202>.

⁸ 2013 China UPR Outcome Addendum, *supra* note 3, p. 4, citing 2013 China UPR Outcome Report, *supra* note 3, paras. 186.42 and 186.48. See also 2013 China UPR Outcome Report, paras. 186.39, 186.41, and 186.46 (recommending human rights training for government employees, including in law enforcement and the judiciary, which the Chinese government also accepted).

⁹ “The Chinese Government has made human rights education an important element in the two National Human Rights Action plans ... clarifying the position of the State as the main body in the compulsory system of human rights education.” 2013 China UPR National Report, para. 14, *supra* note 1. See also 2013 China UPR Outcome Addendum, *supra* note 3, p. 4, citing 2013 China UPR Outcome Report, *supra* note 3, paras. 186.39, 186.41, and 186.46 (recommending human rights training for government employees, including in law enforcement and the judiciary, which the Chinese government also accepted).

¹⁰ See Human Rights Watch, SWEPT AWAY: ABUSES AGAINST SEX WORKERS IN CHINA, 14 (May 2013) (hereinafter referred to as “SWEPT AWAY”), available at <https://www.hrw.org/report/2013/05/14/swept-away/abuses-against-sex-workers-china> (compiling prohibitions making sex work illegal under Chinese law).

¹¹ Asia Catalyst, THE CONDOM QUANDARY: A SURVEY OF THE IMPACT OF LAW ENFORCEMENT PRACTICES ON EFFECTIVE HIV PREVENTION AMONG MALE, FEMALE, AND TRANSGENDER SEX WORKERS IN CHINA, 13-14 (Jul. 2016) (hereinafter referred to as “THE CONDOM QUANDARY”) available at http://asiacatalyst.org/wp-content/uploads/2014/09/The-Condom-Quandary-Report_en.pdf.

¹² Asia Catalyst, MY LIFE IS TOO DARK TO SEE THE LIGHT: A SURVEY OF THE LIVING CONDITIONS OF TRANSGENDER FEMALE SEX WORKERS IN BEIJING AND SHANGHAI, 40 (Jan. 2015), available at <http://asiacatalyst.org/wp-content/uploads/2014/09/Asia-Catalyst-TG-SW-Report.pdf>.

¹³ Asia Catalyst, THE CONDOM QUANDARY, *supra* note 11, at 35-56.

¹⁴ *Id.*

¹⁵ *Id.* at 31-33.

¹⁶ *Id.* at 30 (outlining China’s national public health policies prioritizing condom use as HIV and STI-prevention).

¹⁷ *Id.* at 21.

¹⁸ Asia Catalyst, CUSTODY AND EDUCATION, *supra* note 7, at 18, 30 (citing provisions of the State Council of the People’s Republic of China, on custody and education detention for sex workers and their clients).

¹⁹ Human Rights Watch, SWEPT AWAY, *supra* note 10 at 17, 24 (citing risks of torture and other ill-treatment faced by sex workers in custody); Asia Catalyst, CUSTODY AND EDUCATION, *supra* note 7, at 32 (citing comments of the UN Committee on Economic, Social and Cultural Rights linking compulsory testing and treatment carried out in C&E centers with violations of the right to health, which includes the right to be free from torture and non-consensual medical treatment). *See also* UN Committee on Economic, Social, and Cultural Rights, General Comment 14 on the Right to the Highest Attainable Standard of Health, UN Doc. HRI/GEN/1/Rev.7 (Aug.11, 2000), para. 8, available at http://tbinternet.ohchr.org/_layouts/treatybodyexternal/Download.aspx?symbolno=E%2fC.12%2f2000%2f4&Lang=en.

²⁰ Human Rights Watch, SWEPT AWAY, *supra* note 10 at 23 (citing Public Security Bureau regulations explicitly prohibiting law enforcement from perpetrating violence and abuse against the public). *See also* Lijia Zhang, *In China, Sex Workers’ Lack of Legal Protection Fans Police Abuse*, SOUTH CHINA MORNING POST, Dec. 14, 2012, available at <http://www.scmp.com/comment/insight-opinion/article/1104637/china-sex-workers-lack-legal-protection-fans-police-abuse>.

²¹ *Id.*

²² Human Rights Watch, LOCKED DOORS: THE HUMAN RIGHTS OF PEOPLE LIVING WITH HIV/AIDS IN CHINA, 7 (Sept. 2003) (hereinafter referred to as “LOCKED DOORS”), available at <https://www.hrw.org/reports/2003/china0803/china0903full.pdf>.

²³ *Id.*

²⁴ Asia Catalyst, FIRST DO NO HARM: DISCRIMINATION IN HEALTH CARE SETTINGS AGAINST PEOPLE LIVING WITH HIV IN CAMBODIA, CHINA, MYANMAR, AND VIET NAM, 7 (Mar. 2016) (hereinafter referred to as “FIRST DO NO HARM”), available at http://asiacatalyst.org/wp-content/uploads/2014/09/First-Do-No-Harm_Feb26.pdf.

²⁵ Asia Catalyst, EMPLOYMENT DISCRIMINATION AGAINST PEOPLE LIVING WITH HIV/AIDS AND INJECTION DRUG USERS, 8 (2012), http://www.asiacatalyst.org/wp-content/uploads/2014/09/Kangxin_Employment_Discrimination_Report.pdf.

²⁶ *Id.* at 10, footnote 35 (citing Article 18 of China’s Civil Service Exam Physical Examination Standard disqualifying people living with HIV from eligibility for civil service, as well as specific provisions of the Law on Prevention and Treatment of Infectious Diseases and the Employment Promotion Law stating contradictory provisions that appear to prevent people living with HIV from certain types of employment). *See also* International Labor Office for China and Mongolia, HIV AND AIDS RELATED DISCRIMINATION IN CHINA, 7 (Jan. 2011), available at http://www.ilo.org/wcmsp5/groups/public/---asia/---ro-bangkok/---sro-bangkok/documents/publication/wcms_150386.pdf (noting disqualifications of people living with HIV from eligibility for civil service).

²⁷ Asia Catalyst, FIRST DO NO HARM, *supra* note 23, at 30.

²⁸ UNDP, LEGAL PROTECTIONS AGAINST HIV-RELATED HUMAN RIGHTS VIOLATIONS: EXPERIENCES AND LESSONS LEARNED FROM NATIONAL HIV LAWS IN ASIA AND THE PACIFIC, 72-74 (2013), available at <http://www.undp.org/content/undp/en/home/librarypage/hiv-aids/legal-protections-against-hiv-related-human-rights-violations.html>.

²⁹ Human Rights Watch, LOCKED DOORS, *supra* note 21 at 52 (citing UNAIDS and World Health Organization guidelines on testing for HIV/AIDS requiring specific informed consent before testing).

³⁰ *Id.* at 51-52.

³¹ Human Rights Watch, LOCKED DOORS, *supra* note 21, at 51.

³² See Tibke, *Drug Dependence Treatment in China*, *supra* note 7, at 1.

³³ See UNDP, THE POLICY AND LEGAL ENVIRONMENTS RELATED TO HIV SERVICES IN CHINA, *supra* note 7, at 34-35.

³⁴ *Id.*

³⁵ Human Rights Watch, “WHERE DARKNESS KNOWS NO LIMITS” INCARCERATION, ILL-TREATMENT, AND FORCED LABOR AS DRUG REHABILITATION IN CHINA, 27-36 (2010) (hereinafter referred to as “WHERE DARKNESS KNOWS NO LIMITS”), available at <https://www.hrw.org/report/2010/01/07/where-darkness-knows-no-limits/incarceration-ill-treatment-and-forced-labor-drug>. See also Amnesty International, “CHANGING THE SOUP BUT NOT THE MEDICINE?” ABOLISHING RE-EDUCATION THROUGH LABOUR IN CHINA, 9 (Dec. 2013), available at <https://www.amnesty.org/download/Documents/12000/asa170422013en.pdf>.

³⁶ Human Rights Watch, WHERE DARKNESS KNOWS NO LIMITS, *supra* note 33 at 20.

³⁷ *Id.* at 17. See also UN Human Rights Council, Report of the Special Rapporteur on Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment, Manfred Nowak, UN Doc. A/HRC/10/44 (Jan. 14, 2009), para 57, available at <http://www2.ohchr.org/english/bodies/hrcouncil/docs/10session/A.HRC.10.44AEV.pdf>.

³⁸ Human Rights Watch, WHERE DARKNESS KNOWS NO LIMITS, *supra* note 33 at 3.