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Commission on Narcotic Drugs

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Agenda item 6

Drug demand reduction: world situation with regard to drug abuse

Norway, Spain,* Switzerland, Thailand and the United States of America: revised draft resolution

Achieving universal access to prevention, treatment, care and support for drug users and people living with or affected by HIV

The Commission on Narcotic Drugs,

Reiterating the commitments made in the Single Convention on Narcotic Drugs of 1961,¹ in the preamble to which States parties expressed concern for the health and welfare of mankind,

Noting with great concern the high prevalence and the alarming rise in the incidence of HIV/AIDS and other blood-borne diseases, including hepatitis C, among injecting drug users,

Concerned that the coverage of HIV prevention services is far from adequate in many countries with a high prevalence of injecting drug use,

Reaffirming that all countries should strive to achieve the highest attainable standard of physical and mental health for their people, as recognized in the relevant international instruments,

Concerned about the challenge posed by HIV and its co-infection with tuberculosis and other blood-borne diseases,

Reiterating the commitments made in the United Nations Millennium Declaration² and the Millennium Development Goals, in particular goal 6, on halting and beginning to reverse the spread of HIV/AIDS by 2015,

* On behalf of the States Members of the United Nations that are members of the European Union.

¹ United Nations, *Treaty Series*, vol. 520, No. 7515.



Recalling the commitments made in the 2005 World Summit Outcome, adopted by the General Assembly by its resolution 60/1 of 16 September 2005,

Recalling also the Declaration of Commitment on HIV/AIDS³ and the Political Declaration on HIV/AIDS,⁴ in which Member States committed themselves to pursuing all necessary efforts towards the goal of universal access to comprehensive prevention programmes, treatment, care and support for people with HIV by 2010,

Reiterating its commitment to the Political Declaration and Plan of Action on International Cooperation towards an Integrated and Balanced Strategy to Counter the World Drug Problem,⁵ adopted at the high-level segment of its fifty-second session,

Recalling the relevant decisions, recommendations and conclusions reached by the Programme Coordinating Board of the Joint United Nations Programme on HIV/AIDS at its twenty-fourth meeting, held in Geneva from 22 to 24 June 2009,

Taking note of Economic and Social Council resolution 2009/6 of 24 July 2009, entitled “Joint United Nations Programme on HIV/AIDS (UNAIDS)”,

Recognizing that the full realization of human rights and fundamental freedoms for all is an essential element in the global response to the HIV/AIDS pandemic, including in the areas of prevention, care, support and treatment,⁶ and that such a response reduces people’s vulnerability to HIV/AIDS and prevents stigma and related discrimination against people living with or at risk of HIV/AIDS,

Recalling Human Rights Council resolution 12/24, entitled “Access to medicine in the context of the right of everyone to the enjoyment of the highest attainable standard of physical and mental health”, and resolution 12/27, entitled “The protection of human rights in the context of human immunodeficiency virus (HIV) and acquired immunodeficiency syndrome (AIDS)”, adopted in 2009,

Reaffirming the central importance of promoting the involvement of people living with or affected by HIV and drug use, in shaping responses to the HIV/AIDS epidemic, as well as of working with civil society, a key partner in the global response to HIV/AIDS, including the response to the spread of HIV/AIDS through drug injection,

Taking note of the report of the Executive Director of the United Nations Office on Drugs and Crime entitled “Responding to the prevalence of HIV/AIDS and other blood-borne diseases among drug users”,⁷

Reaffirming the importance of global coordination efforts to scale up sustainable, intensified and comprehensive HIV/AIDS responses, in a comprehensive and inclusive partnership with people living with HIV, vulnerable groups, the most affected communities, civil society and the private sector, as called

² General Assembly resolution 55/2.

³ General Assembly resolution S-26/2, annex.

⁴ General Assembly resolution 60/262, annex.

⁵ A/64/92-E/2009/98, sect. II.A.

⁶ General Assembly resolution 60/262, annex.

⁷ E/CN.7/2010/11.

for in the Political Declaration and Plan of Action on International Cooperation towards an Integrated and Balanced Strategy to Counter the World Drug Problem, within the framework of the “Three Ones”⁸ principles,

Welcoming the XVIII International AIDS Conference, to be held in Vienna in 2010, in which legislators, scientists, academics, policymakers, practitioners, activists and people living with HIV from all over the world will participate,

1. *Urges* the United Nations Office on Drugs and Crime, as the lead partner in the Joint United Nations Programme on HIV/AIDS (UNAIDS) for the HIV response among injecting drug users and people in prison settings, to work with other relevant entities in the United Nations system, in particular the World Health Organization, as well as other relevant initiatives to fight HIV/AIDS, to intensify their support for Governments, with a view to achieving the goals contained in the United Nations Millennium Declaration⁹ and the goals and targets contained in the Declaration of Commitment on HIV/AIDS,¹⁰ the 2005 World Summit Outcome¹¹ and the Political Declaration on HIV/AIDS;¹²

2. *Requests* the United Nations Office on Drugs and Crime to support national authorities to align the policies and clarify the roles and responsibilities of relevant national entities, including drug control and public health agencies, as well as civil society, and to support increased capacity and resources for the provision of comprehensive prevention programmes and treatment, care and related support services, in full compliance with the international drug control conventions and in accordance with national legislation, taking into account all relevant General Assembly resolutions and, when applicable, the *WHO, UNODC, UNAIDS Technical Guide for Countries to Set Targets for Universal Access to HIV Prevention, Treatment and Care for Injecting Drug Users*;¹³

3. *Also requests* the United Nations Office on Drugs and Crime to significantly expand its work with relevant civil society groups in order to address the gap in access to services for people living with or affected by HIV, including drug users, to tackle the issues of stigmatization and discrimination and to support increased capacity and resources for the provision of comprehensive prevention programmes and treatment, care and related support services, in full compliance with the international drug control conventions, in accordance with national legislation, taking into account all relevant General Assembly resolutions and, when applicable, the *WHO, UNODC, UNAIDS Technical Guide for Countries to Set Targets for Universal Access to HIV Prevention, Treatment and Care for Injecting Drug Users* and in line with Economic and Social Council resolution 2009/6 of 24 July 2009;

4. *Encourages* the United Nations Office on Drugs and Crime to continue to emphasize the importance of comprehensive, evidence-based HIV prevention

⁸ Economic and Social Council resolution 2009/6 of 24 July 2009.

⁹ General Assembly resolution 55/2.

¹⁰ General Assembly resolution S-26/2, annex.

¹¹ General Assembly resolution 60/1.

¹² General Assembly resolution 60/262, annex.

¹³ *WHO, UNODC, UNAIDS Technical Guide for Countries to Set Targets for Universal Access to HIV Prevention, Treatment and Care for Injecting Drug Users* (World Health Organization, Geneva, 2009).

programmes as an essential element of national, regional and international responses, through which actions and policies are tailored to the local profile of the HIV epidemic, and to commit itself to further intensifying efforts in this regard;

5. *Calls upon* Member States to intensify efforts to ensure that a wide range of evidence-based HIV prevention programmes taking account of concentrated epidemics and local circumstances is available in all countries, providing access to correct information and adequate health-care and social services and targeting vulnerable population groups;

6. *Urges* Member States to remove obstacles to the achievement of the goal of universal access to HIV prevention, treatment, care and related support services so that people living with HIV, or at elevated risk of contracting HIV, including drug users, may use available services;

7. *Invites* Member States to support and participate fully in the XVIII International AIDS Conference, to be held in Vienna in 2010, in order to share best practices and learn more about AIDS, including by sending representatives of criminal justice and law enforcement bodies.