

Resolution 51/2

The consequences of cannabis use: refocusing prevention, education and treatment efforts for young people

The Commission on Narcotic Drugs,

Recalling that Member States, in the Political Declaration adopted by the General Assembly at its twentieth special session, recognized that action against the world drug problem was a common and shared responsibility requiring an integrated and balanced approach,²² by which supply control and demand reduction reinforced each other, as enshrined in the Declaration on the Guiding Principles of Drug Demand Reduction²³ and the measures to enhance international cooperation to counter the world drug problem,²⁴

Recalling also that, in the Political Declaration, Member States committed themselves to achieving significant and measurable results in the field of demand reduction by 2008,²⁵

Highlighting that cannabis is one of the most widely produced, trafficked and consumed illicit drugs worldwide,

Noting that a number of Member States have reported an increase in the availability of cannabis cultivated indoors, as well as an average overall increase in the tetrahydrocannabinol content of some varieties of cannabis,

Recalling article 38 of the Single Convention on Narcotic Drugs of 1961,²⁶ which requires the parties to the Convention to give special attention to and take all practicable measures for the prevention of abuse of drugs and for the early identification, treatment, education and aftercare of the persons involved,

Recalling also the Declaration on the Guiding Principles of Drug Demand Reduction, which is aimed at preventing the use of drugs and reducing the adverse consequences of drug use,

Concerned about the number of young people reported to have sought treatment for substance abuse due to cannabis use in some countries,

Taking note of recent research correlating cannabis use with some mental health disorders,

Also taking note of research demonstrating the adverse respiratory effects of smoking cannabis, including the risk of lung cancer,

Mindful of the harmful consequences of driving under the influence of cannabis,

Acknowledging the role the International Narcotics Control Board in monitoring and reporting on the application of the international drug control treaties

²² General Assembly resolution S-20/2, annex, para. 2.

²³ General Assembly resolution S-20/3, annex, paras. 4 and 8.

²⁴ General Assembly resolutions S-20/4 A to E.

²⁵ General Assembly resolution S-20/2, annex, para. 17.

²⁶ United Nations, *Treaty Series*, vol. 520, No. 7515.

by Member States with regard to illicit drugs, pursuant to the Single Convention on Narcotic Drugs of 1961 as amended by the 1972 Protocol,²⁷

1. *Appeals* to Member States and relevant international organizations to continue to raise awareness of the health risks of cannabis use among youth and adults;
2. *Invites* Member States to share effective, evidence-based strategies and best practices for preventing the use of cannabis by children and young people in order to protect those vulnerable populations from the health risks associated with cannabis use;
3. *Encourages* Member States to implement programmes preventing the onset of cannabis use, targeting youth, especially children under the age of twelve, to maximize the impact of such programmes;
4. *Also encourages* Member States to urge the health and social research community to continue to study both prevention and treatment practices addressing the health risks and other related risks of cannabis use;
5. *Further encourages* Member States to implement comprehensive prevention and treatment approaches focusing on individuals and their relationships with their peers, families, schools and communities, as appropriate;
6. *Requests* Member States to give special attention to raising awareness among pregnant women of the risks involved in smoking cannabis;
7. *Encourages* Member States to consider carrying out qualitative and quantitative studies on the use of cannabis by young people, including children, and to collect comparable data with removed identifiers on visits to hospitals or dedicated health-care facilities and on treatment demand related to cannabis use in order to better understand the extent of cannabis use;
8. *Calls upon* Member States to further examine the scientific and medical data available on the health consequences of cannabis use.

²⁷ Ibid., vol. 976, No. 14152.