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**Commission on Narcotic Drugs****Sixty-seventh session**

Vienna, 14–22 March 2024

Item 7 of the provisional agenda\*

**Inter-agency cooperation and coordination of efforts in addressing and countering the world drug problem****Note by the Secretariat on inter-agency cooperation and coordination of efforts in addressing and countering the world drug problem\*\*****I. Introduction**

1. To assist Member States with the implementation of the recommendations contained in the outcome document of the 2016 special session of the United Nations General Assembly (UNGASS) on the world drug problem, in April 2017 the Executive Committee established by the Secretary-General tasked United Nations Office on Drugs and Crime (UNODC) with leading the coordination of relevant United Nations (UN) entities. Several United Nations system-wide activities were initiated in response to the Executive Committee decision, including the development of a matrix of UNGASS-related activities in headquarters, and in the field, providing a comprehensive overview of joint and individual activities undertaken in supporting Member States with the practical implementation of the UNGASS outcome document.

2. This report analyses the initiatives that were submitted in the matrix including those most recently reported between 2022 and 2023 and outlines the extent of involvement of various United Nations entities and of inter-agency collaboration in assisting Member States to implement the international drug policy commitments in the different operational recommendations<sup>1</sup> of the UNGASS outcome document.

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\* E/CN.7/2024/1.

\*\* This document has not been edited.

<sup>1</sup> For the purposes of this report the operational recommendations of the UNGASS outcome document have been abbreviated as follows: operational recommendations on demand reduction and related measures, including prevention and treatment, as well as other health-related issues (*Chapter I: demand reduction*); operational recommendations on ensuring the availability of and access to controlled substances exclusively for medical and scientific purposes, while preventing their diversion (*Chapter II: availability and access*); operational recommendations on supply reduction and related measures; effective law enforcement; responses to drug-related crime; and countering money-laundering and promoting judicial cooperation (*Chapter III: supply reduction*); operational recommendations on cross-cutting issues: drugs and human rights, youth, children, women, and communities (*Chapter IV: human rights*); operational recommendations on cross-cutting issues in addressing and countering the world drug problem: evolving reality, trends



3. The analysis and visualizations that follow are based solely on the activities reported in the matrix, and while they represent the variety of individual and joint activities undertaken by United Nations entities, they do not account for the size or budget of the reported activities, nor are they an indication of the type of work delivered. Furthermore, inputs that were outside the scope of this report such as participation at specific side events and statements at sessions of the Commission on Narcotic Drugs (CND) are not featured in the analysis.

## II. International cooperation

4. In the 2009 Political Declaration and Plan of Action on International Cooperation towards an Integrated and Balanced Strategy to Counter the World Drug Problem, Member States committed to increasing cooperation at the regional and international level. In the Joint Ministerial Statement, adopted by the CND at its 2014 high-level review of the implementation of the 2009 Political Declaration, Member States reiterated their commitment to addressing and countering the world drug problem based on the principle of common and shared responsibility. In the outcome document of the 2016 special session of the General Assembly on the world drug problem, Member States included a standalone chapter on strengthening international cooperation. The title of the outcome document, “Our joint commitment to effectively addressing and countering the world drug problem” acknowledged that the world drug problem remains a common and shared responsibility that needs to be addressed in a multilateral setting through effective and increased international cooperation.

5. In the 2019 Ministerial Declaration on “Strengthening our actions at the national, regional and international levels to accelerate the implementation of our joint commitments to address and counter the world drug problem”, adopted by the CND by consensus at the opening of the Ministerial Segment of its 62nd session in March 2019, Member States committed to accelerating, based on the principle of common and shared responsibility, the full implementation of the 2009 Political Declaration, the 2014 Joint Ministerial Statement and the 2016 UNGASS outcome document, aimed at achieving all commitments, operational recommendations and aspirational goals set out therein.

6. In the declaration, Member States committed to ensuring that no one affected by the world drug problem is left behind by enhancing efforts to bridge the gaps in addressing the persistent and emerging trends and challenges through enhanced cooperation at all levels – national, regional, and international.

7. Member States also reaffirmed the role of UNODC, as the leading entity in the United Nations system for addressing and countering the world drug problem, and encouraged contributions from relevant United Nations entities, international financial institutions, and relevant regional and international organizations, within their respective mandates, to the work of the CND, the policymaking body of the United Nations with prime responsibility for drug control matters. The call for enhanced cooperation was also addressed to the United Nations system. In the 2019 Ministerial Declaration, UNODC was encouraged to increase cooperation and collaboration with all relevant United Nations entities, within their respective mandates, when assisting Member States in designing and implementing comprehensive, integrated, and balanced national drug strategies, policies, and programmes.

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and existing circumstances, emerging and persistent challenges and threats, including new psychoactive substances, in conformity with the three international drug control conventions and other relevant international instruments (*Chapter V: trends and challenges*); Operational recommendations on strengthening international cooperation based on the principle of common and shared responsibility (*Chapter VI: international cooperation*); operational recommendations on alternative development; regional, interregional and international cooperation on development-oriented balanced drug control policy; addressing socioeconomic issues (*Chapter VII: alternative development*).

### III. United Nations system coherence

8. In 2005 at the World Summit, the Secretary-General committed to enhance coherence, efficiency, and effectiveness within the United Nations system in line with the Millennium Development Goals (MDGs) through a new country level approach entitled “Delivering as One”.<sup>2</sup> A decade later, expanding on the MDGs, Member States adopted the 2030 Agenda for Sustainable Development and its 17 goals (SDGs), pledging to “leave no one behind”, and adopting a shared United Nations system framework for action to uphold the pledge.<sup>3</sup> This pledge and the 2030 agenda were embedded within the 2016 UNGASS outcome document, which welcomed continued efforts to enhance coherence within the United Nations system at all levels. The outcome document also reaffirmed the need to strengthen cooperation between UNODC and other United Nations entities in their efforts to support Member States.<sup>4</sup>

9. During the meeting of the United Nations Chief Executives Board (CEB) in November 2018, the principals of United Nations agencies adopted the “United Nations system common position supporting the implementation of the international drug control policy through effective inter-agency collaboration” committing to harness synergies, strengthen inter-agency cooperation, and best use the expertise within the United Nations system.<sup>5</sup> The position also agreed to support each other’s activities, within established mandates, and to deliver balanced, comprehensive, integrated, evidence-based, human rights-based, development-oriented, and sustainable support to Member States in implementing joint commitments.

10. With a view to ensuring coherent efforts to realize the commitments under the common position and coordinated data collection to promote scientific, evidence-based implementation of international commitments, the United Nations system Coordination Task Team,<sup>6</sup> led by UNODC, was created within the framework of the Secretary-General’s Executive Committee.

11. Since the adoption of the UNGASS outcome document in 2016, the United Nations system entities have been collaborating continuously in all areas identified. More details on specific United Nations entities involved in drug-related activities and specific examples of joint activities is provided below.

### IV. United Nations entities and partner organizations

12. Since the development of a mapping matrix on UNGASS-related activities, twenty-three United Nations entities and partner organizations have been identified as covering at least one thematic chapter of the UNGASS outcome document through some form of activity or programme (figure 1). In addition, a number of other United Nations entities participate in inter-agency collaborations, such as the Inter-agency Technical Working Group on Prevention of Drug Use and Treatment and Care of Drug

<sup>2</sup> General Assembly (UNGA), *Follow-up to the outcome of the Millennium Summit*, 20 November 2006, <<https://shorturl.at/bdFO8>> [last accessed 22/02/24].

<sup>3</sup> United Nations Sustainable Development Group (UNSDG), *Operationalizing Leaving No One Behind: Good Practice Note for UN Country Teams*, 2002, <<https://rb.gy/7g829I>> [last accessed 29/01/24].

<sup>4</sup> General Assembly (UNGA), *Outcome Document of the 2016 United Nations General Assembly Special Session on the World Drug Problem: Our Joint Commitment to Effectively Addressing and Countering the World Drug Problem*, 19–21 April 2016, <<https://shorturl.at/nqwE4>> [last accessed 22/02/24].

<sup>5</sup> Chief Executives Board (CEB), *Annex 1: United Nations system common position supporting the implementation of the international drug control policy through effective inter-agency collaboration*, 2018, <<https://shorturl.at/wGQRZ>> [last accessed 22/02/24].

<sup>6</sup> As of June 2023, the Task Team includes: UNODC (as lead agency), EOSG, IMO, OHCHR, UNAIDS, UNESCO, UNDP, UN-Women, UPU, and WHO, see <<https://shorturl.at/jxEIK>> [last accessed 22/02/24].

Use Disorders,<sup>7</sup> and the Inter-Agency Task Force on the Prevention and Control of Non-Communicable Diseases (UNITAF).<sup>8</sup> While the report focuses on collaborations between United Nations entities, other partners working on drug-related matters include international organizations, regional organizations, civil society organizations, academic institutions, and other stakeholders.

13. The following United Nations entities reported an activity within a thematic chapter of the UNGASS outcome document: Department of Political and Peace Building Affairs (DPPA), Department of Peacekeeping Operations (DPKO), International Civil Aviation Organization (ICAO), International Labour Organization (ILO), International Maritime Organization (IMO), International Narcotics Control Board (INCB), International Organization for Migration (IOM), Office of the High Commissioner for Human Rights (OHCHR), Joint United Nations Programme on HIV/AIDS (UNAIDS), Department of Economic and Social Affairs (UNDESA), United Nations Development Programme (UNDP), United Nations Educational, Scientific and Cultural Organization (UNESCO), United Nations Population Fund (UNFPA), United Nations Human Settlements Programme (UN-Habitat), United Nations High Commissioner for Refugees (UNHCR), United Nations Children's Fund (UNICEF), United Nations Industrial Development Organization (UNIDO), United Nations Office on Drugs and Crime (UNODC), United Nations Entity for Gender Equality and the Empowerment of Women (UN-Women), Universal Postal Union (UPU) and World Health Organization (WHO).

14. While some of these entities deliver technical assistance or capacity-building activities, others are involved in these efforts through their support with logistics, coordination, or delivery. Moreover, numerous activities reported in the mapping matrix crosscut between thematic chapters. Figure 1 focuses on the involvement of entities in thematic areas, irrespective of the type or scale of involvement.

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<sup>7</sup> This Working Group includes ILO, IOM, OHCHR (observer), UNCTAD, UNDP, UNESCO, UNFPA, UN-Habitat, UNHCR, UNICEF, UNODC, WHO and partners.

<sup>8</sup> This Task Force includes ADB, AfDB, EBRD, FAO, GFATM, IAEA, IARC, IDB, IDLO, INCB, IOC, IOM, ITU, OHCHR, OIC, UNAIDS, UNDP, UNESCO, UNFPA, UN-Habitat, UNHCR, UNICEF, UNODC, UNOPS, UNOSDP, UNRWA, UNSCN, UNU, WB, WFP, WHO, WIPO, WTO.

Figure 1  
United Nations entities and partners involved in joint and individual activities in accordance with the thematic chapters of the UNGASS outcome document

	DEMAND REDUCTION	AVAILABILITY & ACCESS	SUPPLY REDUCTION	HUMAN RIGHTS	TRENDS & CHALLENGES	INTERNATIONAL COOPERATION	ALTERNATIVE DEVELOPMENT
DPPA							
DPKO							
ICAO							
ILO							
IMO							
INCB							
INTERPOL							
IOM							
OHCHR							
UNAIDS							
UNDESA							
UNDP							
UNESCO							
UNFPA							
UN-Habitat							
UNHCR							
UNICEF							
UNIDO							
UNODC							
UN-Women							
UPU							
WCO							
WHO							

15. Of the entities featured above (figure 1), UNODC, as the lead agency on drug-related matters, delivers assistance to Member States across all seven thematic chapters, followed by WHO and UNAIDS.

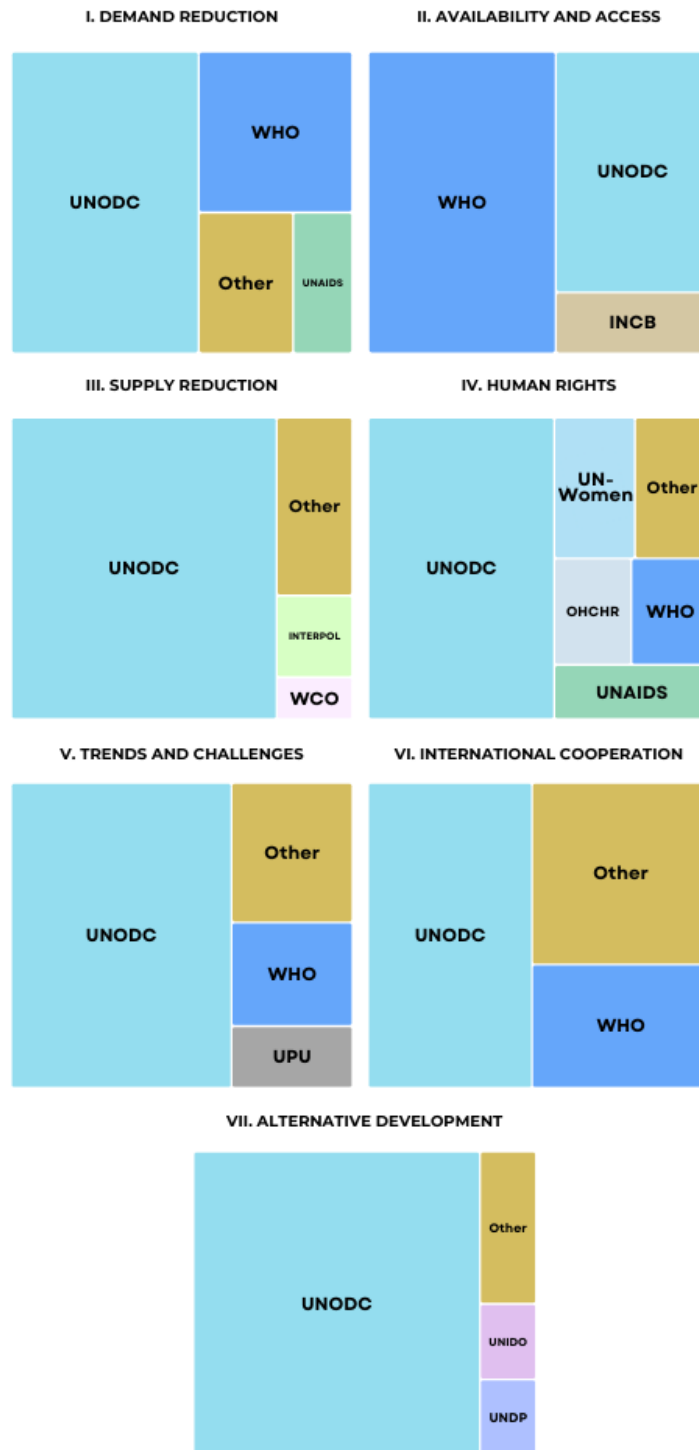
16. *Chapter I* of the UNGASS outcome document on demand reduction is the thematic area that the widest variety of entities are involved in, including ILO, INCB, IOM, UNAIDS, UNDP, UNESCO, UNFPA, UN-Habitat, UNHCR, UNICEF, UNODC, UN-Women, and WHO. While over half of demand reduction activities involve UNODC, the involvement of WHO was reported in 25 per cent of activities, UNAIDS in 8 per cent, and other entities make up the remaining 10 per cent including ILO, IOM, UNDP, UNESCO, UNFPA, UNHCR, UNICEF, and UN-Women.

17. On the other hand, only three United Nations entities report delivery of assistance in some form under *Chapter II* on availability and access. WHO is involved to a large extent in the work reported (56 per cent), followed by UNODC (38 per cent) and INCB (6 per cent). UNODC and WHO together deliver the Joint Global Programme on Access to Controlled Drugs for Medical Purposes While Preventing

Diversion and Abuse<sup>9</sup> with the Union for International Cancer Control (UICC), which is one of only two inter-agency programmes on availability and access.

Figure 2

**Extent of involvement of United Nations entities and partners in joint and individual activities in accordance with the thematic chapters of the UNGASS outcome document**



18. United Nations entities and partner organizations leading efforts on *Chapter III* on supply reduction include UNODC, INTERPOL and WCO. Other actors involved

<sup>9</sup> For more on the programme see, <<https://rb.gy/6mxxcv>> [last accessed 22/02/24].

in 14 per cent of activities combined and reported since the development of the mapping matrix in 2017 include DPPA, DPKO, ICAO, IMO.

19. Activities submitted under *Chapter IV* on cross-cutting issues such as human rights include a number of United Nations entities, such as UNODC (54 per cent), followed by UN-Women (11 per cent) and OHCHR, UNAIDS and WHO, in 8 per cent of activities each. Other entities featured were UNDP and UNFPA in 11 per cent of activities combined.

20. In the other cross-cutting issues *Chapter V* on trends and challenges, UNODC is recorded in two thirds of activities (67 per cent). As in the field of demand reduction, WHO is the second most reported entity in 13 per cent of activities, followed by UPU (7 per cent of efforts) and other entities made up the remaining 13 per cent, including ICAO, INCB, UNAIDS, UNDESA, UNDP, INTERPOL and WCO.

21. UNODC is overwhelmingly engaged in 83 per cent of alternative development (*Chapter VII*) initiatives. In addition, UNDP and UNIDO feature in 4 per cent of activities each. Other entities that are involved in alternative development initiatives include IOM and UN-Women, in particular, in Afghanistan.

## V. Thematic areas and cross cutting efforts

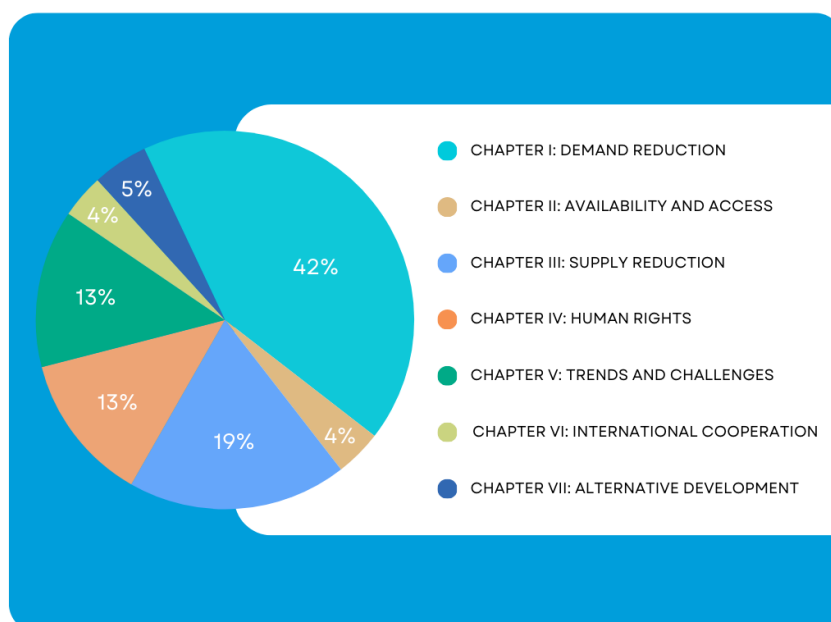
22. In terms of the overall distribution of reported activities by thematic chapter from 2017 until end of 2023 nearly half of all individual and joint activities were reported under *Chapter I* on demand reduction, illustrating the overwhelming variety of activities being delivered by the United Nations system in comparison to other thematic areas of the UNGASS outcome document (see figure 3 below).

23. *Chapter III* on supply reduction accounts for 19 per cent of all reported activities. Both at 13 per cent are activities reported under *Chapter V* on trends and challenges and *Chapter IV* on human rights.

24. *Chapter VII* on alternative development makes up 5 per cent of reported activities and represents mostly activities delivered at country level. Lastly, at 4 per cent of reported activities respectively are *Chapter II* on availability and access and *Chapter VI* on international cooperation.

Figure 3

**Distribution of reported activities in accordance with the thematic chapters of the UNGASS outcome document**



25. Within each thematic chapter, the outcome document also referred to specific focuses such as HIV/AIDS, women, children, and criminal justice, among others. While these thematic focuses are associated with specific thematic chapters (operational recommendations) within the UNGASS outcome document, they are cross-cutting in practice, and related activities have been recorded, in some cases, under several chapters. An example of a cross-cutting activity includes the inter-agency work on specific needs of women who use drugs by UNODC, WHO, UNAIDS and UN-Women, reported under *Chapter I* (demand reduction), but cross-cutting with *Chapter IV* (human rights).

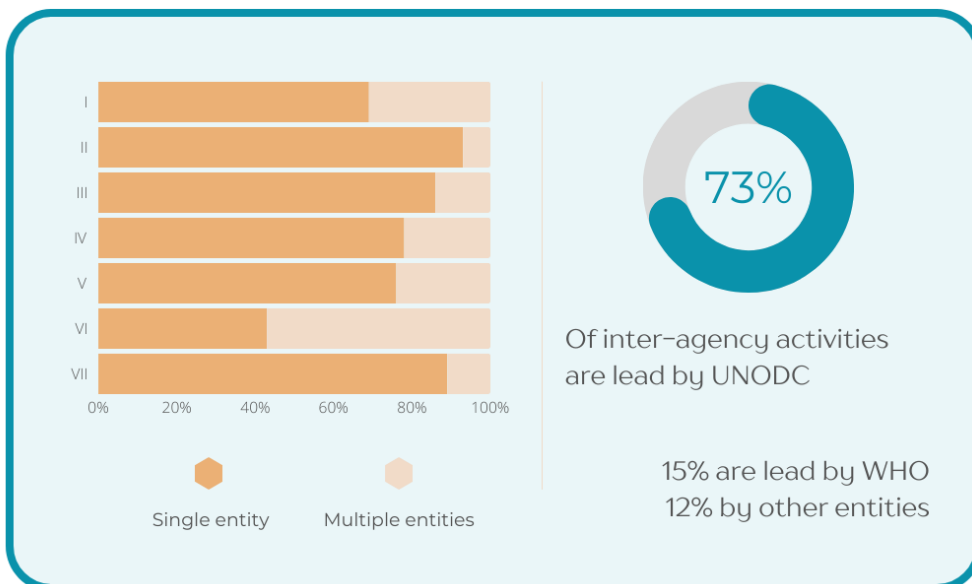
## VI. Inter-agency collaboration

26. Based on activities reported in the mapping matrix, there is enhanced collaboration among United Nations entities in all thematic areas of the UNGASS outcome document. The following section analyses activities that involved collaboration between two or more entities. Activities that were reported with only one participating entity may also involve collaboration with other non-United Nations entities including regional organizations, and civil society despite not being reflected as collaborative in the stacked bar chart below (figure 4).

27. Among the reported inter-agency activities on drug-related matters, UNODC is the lead entity in 73 per cent and WHO in 15 per cent of all reported collaborative initiatives (see figure 4). The remaining 12 per cent of activities have been led by entities including DPKO, OHCHR, UNAIDS, UNDESA, UN-Women, and UPU.

Figure 4

### Inter-agency collaboration in accordance with the thematic chapters of the UNGASS outcome document



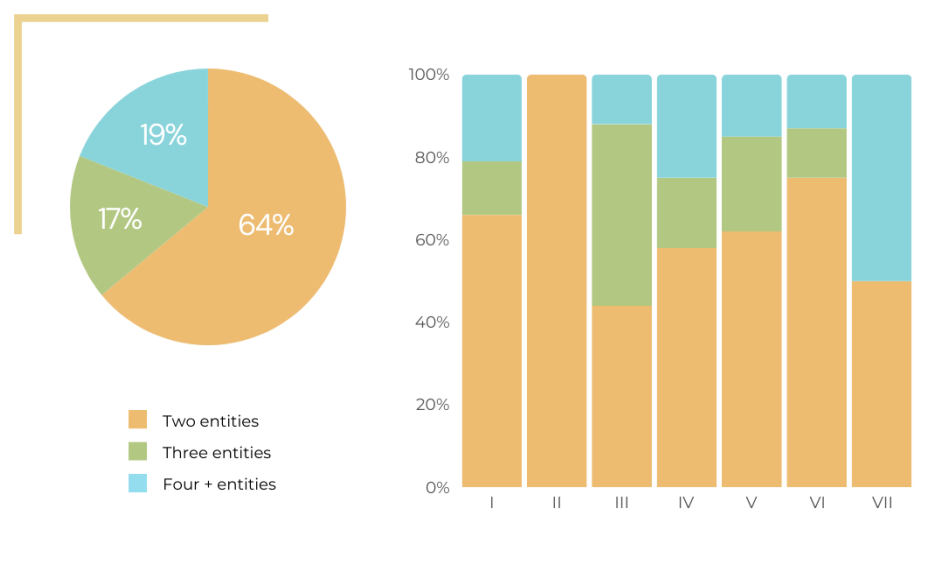
28. In addition to accounting for the largest number of reported activities, *Chapter I* on demand reduction is the thematic area with the second highest degree of inter-agency collaboration as seen in figure 4, this follows *Chapter VI* on international cooperation. Some examples include the development and update of the UNODC/WHO International Standards on Drug Use Prevention which included the participation of UNESCO, partner organizations and over 100 experts from over 40 countries. UNODC together with UNAIDS, ILO, UNDP, UNFPA, and WHO developed and disseminated a technical guide to countries with a comprehensive package of interventions on HIV prevention, treatment, care and support in prisons and other closed settings.



29. In addition, multiple agencies come together in the biannual Forum on Alcohol, Drugs and Addictive Behaviours which has been held since 2017 and is led by WHO with participation from INCB, UNHCR, UNODC and other partners.

Figure 5

**Size of overall inter-agency collaboration between United Nations entities and partner organizations and in accordance with the thematic chapters of the UNGASS outcome document**



30. The next highest degree of inter-agency collaboration occurs in activities reported under the chapters on cross-cutting issues, *Chapter IV* on human rights, and *Chapter V* on trends and challenges including NPS. Efforts focused on these cross-cutting issues also involve a range of non-United Nations partners such as civil society, academia, and law enforcement agencies. For instance, UNODC, UN-Women, OHCHR, UNDP jointly developed the practitioners' manual on women's access to justice programming, and UNODC, WHO, UNFPA and UNAIDS, collaborated with civil society partners on a briefing paper on addressing gender-based violence against women and people of diverse gender identity and expression who use drugs.

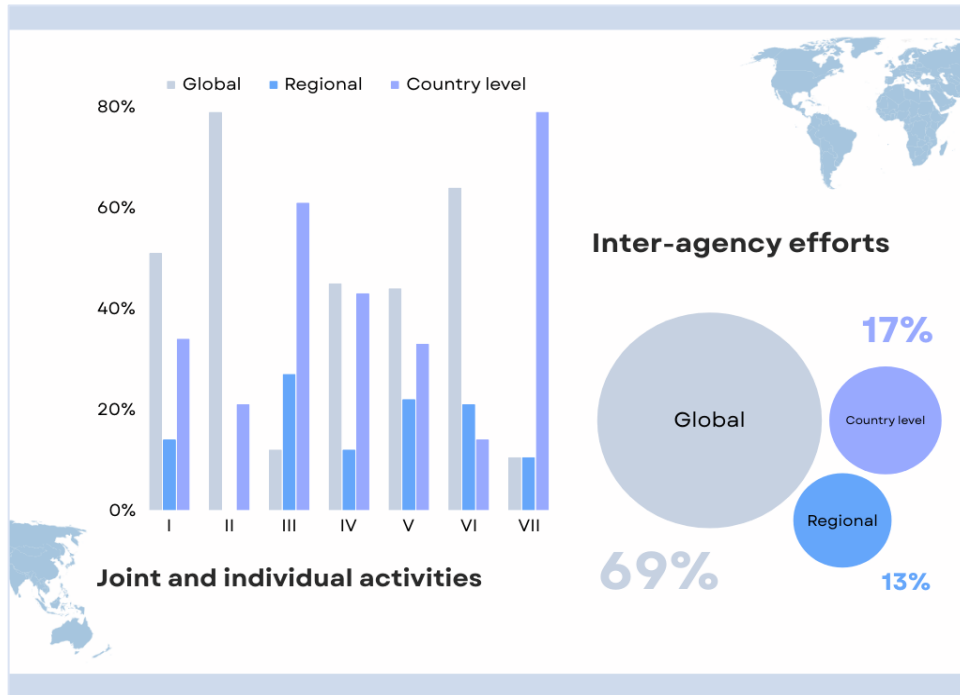
31. As for inter-agency efforts reported under *Chapter V*, one example is the collaboration between UPU, INCB, and WCO, dating back to 2018, assisting Member States to build capacity on postal security. Since its launch in 2019, the United Nations Toolkit on Synthetic Drugs has benefitted from collaboration with numerous partners. To date over 124,000 users registered to access the toolkit from 203 countries and territories.

32. While only 11 per cent of reported activities under *Chapter VII* on alternative development involved multiple entities, inter-agency collaboration has been steadily increasing, in particular, in Afghanistan and Colombia (see section VIII for more on these recent initiatives).

## VII. Geographic reach of drug-related activities

33. Global, regional, and country level reach of reported activities varies. As exemplified in figure 6, most of the activities were reported as being delivered at the global or country level. Alternative development activities reported under *Chapter VII* were mostly at the country level with programmes and initiatives in Afghanistan, Bolivia (Plurinational State of), Brazil, Colombia, Lao People's Democratic Republic, Myanmar, and Peru.

Figure 6  
**Geographic reach of reported activities in accordance with the thematic chapters of the UNGASS outcome document and within inter-agency efforts specifically**



34. Activities that were reported as global, include those under UNODC global programmes such as the Global Programme on Drug Dependence Treatment and Care, the Global Programme on Criminal Network Disruption, the Global Programme on Addressing Prison Challenges, the Global Programme on Violence against Children in the field of Crime Prevention and Criminal Justice, the Global Programme on Alternative Development and Sustainable Livelihoods, or the Container Control Programme. Activities categorized as global, also include publications such as the UNODC/WHO International Standards for the Treatment of Drug Use Disorders, UNODC/WHO International Standards on Drug Use Prevention, Guidelines for the management of cancer pain in adults and adolescents among others.

## VIII. Recent inter-agency activities

35. Detailed below are examples of collaborative activities reported by United Nations entities in 2023.

### **Demand reduction and related measures, including prevention and treatment, as well as other health-related issues**

36. UNODC organized a technical consultation session to develop a publication in line with the UNODC/WHO International Standards on Drug Use Prevention that assists in improving the role of law enforcement officers in drug prevention in school settings. In addition, UNODC mobilized 24,300 young people to meaningfully participate in the drug prevention efforts of their communities through its Youth Initiative.

37. Implementation efforts have continued in the inter-agency initiative INSPIRE, a set of seven evidence-based strategies for countries and communities working to eliminate violence against children, which include family and life skills as implemented by UNODC globally.<sup>10</sup> Led by WHO, UNODC cooperated in the field

<sup>10</sup> INSPIRE, The Seven Strategies for ending violence against children, <<https://shorturl.at/OSXY8>> [last accessed 22/02/24].

of prevention along with PAHO, UNICEF and other international and civil society organizations including the World Bank, the United States Centre for Disease Control and Prevention (CDC), the Global Partnership to End Violence Against Children, the President's Emergency Program for AIDS Relief (PEPFAR), Together for Girls, and the United States Agency for International Development (USAID).

38. Launched at the CND in 2020 with dissemination ongoing in five United Nations languages, the UNODC/WHO International Standards for the Treatment of Drug Use Disorders continue to be recognized by Member States as an important and useful tool.<sup>11</sup> UNODC and WHO are jointly developing an implementation guide to the Standards.

39. WHO and UNODC continued to collaborate in delivering the Stop Overdose Safely (S-O-S) Initiative, which was launched in 2017 at the CND. A multisite study was implemented demonstrating the feasibility of community-based naloxone in low- and middle-income countries. The results of the study were published in peer-review journals<sup>12</sup> and as inputs to the S-O-S training manual, which is due for publication in 2024.

40. Under the Inter-Agency Standing Committee (IASC)<sup>13</sup> a new thematic group on Addressing Substance Use and Substance Use Disorders in Humanitarian Settings within IASC reference group on Mental Health and Psychosocial Support (MHPSS) was initiated, to improve service provision in humanitarian settings, for people negatively affected by substance use (both drugs and alcohol) and, for those with disorders due to substance use, through evidence-based prevention, treatment, and care. Joint training materials with WHO and UNHCR are under development and will be piloted and launched in 2024. The handbook on treatment of drug use disorders in humanitarian settings is being finalized as a joint effort between UNODC, WHO and UNHCR along with the IASC-MHPSS network.

41. At the country level UNODC continues to collaborate with WHO, UNDP, UNFPA, and UNICEF on the programme in Afghanistan on drug demand reduction and HIV under the One United Nations Health Framework, supporting, inter alia, the provision of evidence-based treatment and care, both pharmacological and psychosocial.

42. Under the leadership of its Executive Director, UNODC served as the Chair of the UNAIDS Committee of Cosponsoring Organizations (CCO) in 2023 and supported the Joint United Nations Programme on HIV/AIDS<sup>14</sup> towards achieving the SDGs and meeting the 2025 targets outlined in the Global AIDS Strategy.

43. In 2023, in partnership with WHO and UNAIDS, UNODC continued to provide technical support for the establishment and implementation of Opioid Agonist Therapy (OAT). Sustained technical support and advocacy efforts contributed to formal requests to support the initiation of OAT programmes in Jordan, Libya, and Tunisia. Moreover, based on the operational tool “Establishing and delivering evidence-based, high-quality opioid agonist services”, UNODC trained over

<sup>11</sup> CND *resolution 64/3* on promoting scientific evidence-based, quality, affordable and comprehensive drug prevention, treatment, sustained recovery and related support services, 2021, <<https://shorturl.at/avFY5>> [last accessed 22/02/24]; CND *resolution 59/4* on development and dissemination of international standards for the treatment of drug use disorders, 2016, <<https://shorturl.at/cvBLV>> [last accessed 22/02/24].

<sup>12</sup> Walker, S. et al., “More than saving lives: Qualitative findings of the UNODC/WHO Stop Overdose Safely (S-O-S) project”, *International Journal of Drug Policy* (February 2022) vol. 100. <<https://shorturl.at/dGX68>> [last accessed 19/02/24]; Dietze P., et al., “An observational prospective cohort study of naloxone use at witnessed overdoses, Kazakhstan, Kyrgyzstan, Tajikistan, Ukraine”, *Bull World Health Organ* (March 2022), 1;100(3): 187–195, <<https://shorturl.at/HJO26>> [last accessed 22/02/24].

<sup>13</sup> IASC, WHO, UNODC, and chaired by UNHRC with participation from other agencies including IOM, UNICEF, and others.

<sup>14</sup> The Joint United Nations Programme on HIV/AIDS (UNAIDS) unites the efforts of eleven United Nations organizations: ILO, UNDP, UNESCO, UNFPA, UNHCR, UNICEF, UNODC, UN-Women, WFP, WHO and the World Bank.

200 service providers and community-led organizations to develop and implement related services in Belarus, India, South Africa, Nigeria, and Kenya.

44. UNODC, jointly with WHO and UNAIDS, provided a comprehensive capacity-building programme to over 350 state service providers and community-led organizations to implement gender-responsive HIV, hepatitis C and hepatitis B programmes for people who use stimulant drugs through eight trainings in Afghanistan, India, Malaysia, the Philippines, South Africa, Indonesia, Bangladesh, and the East African region.

45. In addition, jointly with UNAIDS, UNFPA, UN-Women, WHO, and civil society and community-led partners, UNODC delivered regional training sessions in Eastern and Southern Africa, South and South-East Asia and Central Asia as well as national trainings in Nepal, Mozambique, Kazakhstan, Egypt, and Morocco to over 200 prison service providers, prison administration and national stakeholders on gender-responsive and evidence-based interventions to prevent mother-to-child HIV transmission in prison settings.

#### **Ensuring the availability of and access to controlled substances exclusively for medical and scientific purposes, while preventing their diversion**

46. As mentioned earlier in the report, only 4 per cent of all reported activities focus on ensuring availability of and access to controlled substances (*Chapter II* of the UNGASS outcome document). Up to 2023, only three United Nations entities reported activities in that thematic area. The level of collaboration has been strengthening over the most recent period, including through the UNODC initiative to launch in January 2024 the Informal Inter-Agency Technical Working Group on Access to Controlled Medicines While Preventing Diversion and Non-medical Use. The working group brought together a range of United Nations entities including UNDP, UNFPA, UNICEF, and WHO to offer a multisectoral approach to ensuring the availability of controlled medicines. The goal of the Working Group is to substantially increase inter-agency coordination and collaboration in the development, implementation, quality assurance, and evaluation of policies and programmes aimed at ensuring access and availability to controlled medicines for medical and scientific purposes, while preventing diversion, and non-medical use.

47. Also in January 2024, UNODC launched the UNODC's Young Doctors Network, which aims to contribute to different areas of work including advocacy and awareness-raising, enhanced education, shaping the environment, research and data-sharing, intergenerational communication and bridging relevant national authorities.

48. The Joint Global Programme, Access to Controlled Drugs for Medical Purposes While Preventing Diversion and Abuse between UNODC, WHO and UICC continued implementing in 2023. In Indonesia a policy desk review and supply chain analysis on controlled medicines was conducted with follow-up discussions on strategic planning. In the South Pacific region, UNODC and WHO engaged in discussions on the coordination of training activities on the management of palliative care, and the prescription and use of controlled medicines for cancer-related pain in Fiji and Timor-Leste. UNODC also supported the Democratic Republic of Congo with engaging civil society organizations to improve their capacity to deliver training to health professionals supporting cancer and palliative care patients. The programme also took stock of the last ten years of joint work and explored ways forward during a technical consultation with joint partners UNODC, WHO, and UICC, as well as INCB held in September 2023.

49. In June 2023, WHO published a report entitled "Left behind in pain: Extent and causes of global variations in access to morphine for medical use and actions to

improve safe access”.<sup>15</sup> The report describes the extent and causes of global variations in access to morphine for medical use and seeks to understand the enablers for, and barriers to, safe access to morphine for medical use. It proposes actions to address these barriers through balanced policies. Since the release of the report UNDOC has participated in a series of WHO-led webinars as part of adopting an inter-agency approach to availability and access of controlled medicines, especially of morphine, for the treatment of pain.

50. UNITAF, the United Nations Inter-Agency Task Force on the Prevention and Control of Non-Communicable Diseases (NCDs) continued to hold its biannual meetings to increase awareness on NCDs advocating for greater attention and the mobilization of resources to combat NCDs.

### **Supply reduction and related measures; effective law enforcement; responses to drug-related crime, and countering money-laundering and promoting judicial cooperation**

51. Collaboration continued in the UNODC/WCO Container Control Programme (CCP) and the Airport Communication Programme (AIRCOP) with ICAO and INTERPOL, and in 2023 a process was initiated to merge the two programmes. In the most recent reporting period, 71 CCP beneficiary countries with 111 Port Control Units (PCU) and 22 Air Cargo Control Units (ACCU) were supported and equipped. Just under 4,500 participants were trained in 309 training activities and 1,426 seizure cases involving cocaine, heroin, cannabis, NPS and precursor chemicals were reported by these units. In AIRCOP, 41 beneficiary countries with 30 Joint Airport Interdiction Task Forces (JAITFs) were supported and equipped. A total of 120 training and mentoring activities, as well as exchange and best practices visits were organized, and 966 seizures were reported by JAITFs.

52. In 2023, UNODC established a new inter-agency collaboration with ICAO to support the development and reach of the United Nations Toolkit on Synthetic Drugs, co-launching a new specialized module on Air Trafficking as part of the United Nations Toolkit on Synthetic Drugs. Bringing the number of brokered collaborations to 12 United Nations agencies to strengthen global response on synthetic drugs. Through these inter-agency collaborations, UNODC has conducted 16 expert consultations for 824 participants to promote public understanding and bridging the knowledge gap on science informed responses to synthetic drugs. With the engagement of multiple United Nations agencies, the UNODC has also created a community of 124,000 professionals from 203 countries and territories, active users of the United Nations Toolkit on Synthetic drugs providing direct access to 404 resources and tools to support action on global synthetic drug problem.

53. UNODC continues to implement its Synthetic Drug Strategy, first launched in 2021. The strategy presents a framework to guide comprehensive and effective action at the international, regional, and national level to address the growing synthetic drugs problem. Through collaborations with 20 implementing partner programmes from across UNODC and the United Nations system, UNODC has delivered capacity-building and technical assistance to over 54 countries to galvanize international action and bolster response to better predict, prevent, the threats posed by synthetic drugs.

### **Cross-cutting issues: drugs and human rights, youth, children, women, and communities**

54. In 2023 the United Nations Joint Programme on Technical Cooperation and Capacity-building for the Promotion and Protection of Human Rights in the Philippines developed by OHCHR, UNODC and other partners continued implementing. The programme includes a component on human rights-based

<sup>15</sup> WHO, “Left behind in pain: Extent and causes of global variations in access to morphine for medical use and actions to improve safe access”, 15 June 2023, <<https://shorturl.at/pyTW9>> [last accessed 22/02/24].

approaches to drug policies in the country and drew on relevant guidance set out in the UNGASS 2016 recommendations. Within the joint programme, United Nations entities have been working closely with national counterparts, including the Department of Foreign Affairs, the Department of Justice, the Philippines National Police and the Presidential Human Rights Committee as well as civil society actors to provide cohesive approaches that address human rights challenges.

55. In February 2023 WHO published the “Guidelines on Parenting Interventions to Prevent Maltreatment and Enhance Parent-Child Relationships with Children aged 0–17 Years”, which included contributions from UNODC on its work on evidence-based parenting interventions.

56. Leveraging the progress made so far, in March 2023, UNODC partnered with UN-Women to strengthen efforts in promoting gender equality and meeting the specific needs of women and girls, including through the protection of essential health services and reintegration services for women detainees and those discharged from drug treatment services.

57. To address gender-specific health needs of people who use drugs and increase their access to gender-responsive HIV services, UNODC, jointly with UNAIDS, UNFPA, UN-Women, WHO and civil society organizations worked on issues related to gender-based violence against women who use drugs.

58. The dissemination, promotion, and national and regional dialogues on the International Guidelines on Human Rights and Drug Policy continued to be delivered by OHCHR in collaboration with UNAIDS, UNDP and WHO, as well as civil society and academic partners at country, regional and international levels.

**Cross-cutting issues in addressing and countering the world drug problem: evolving reality, trends and existing circumstances, emerging and persistent challenges and threats, including new psychoactive substances, in conformity with the three international drug control conventions and other relevant international instruments**

59. In pursuance of its mandate to provide scientific support to the three treaty bodies under the international drug conventions, namely CND, INCB and WHO, UNODC continued to provide scientific support to the WHO Expert Committee on Drug Dependence (ECDD) including on prioritizing the most persistent, prevalent, and harmful substances for (re)scheduling under the international drug conventions. UNODC and INCB continued to maintain observer status at the WHO ECDD meetings to consider potential candidate substances, including new psychoactive substances, for scheduling.

60. UPU, INCB and WCO continued collaborating on the Postal Security capacity-building project where they trained over 100 postal security and customs focal points in Asia Pacific, Caribbean, and Latin America. Training by UPU is also being conducted on intellectual property crime and illicit good mitigation through the International Crime Investigators College in partnership with INTERPOL. To date over 80 postal security experts from 35 countries in the regions of Asia Pacific and Middle East and North Africa have been trained, and there are plans for continued implementation worldwide.

61. In the framework of the SMART Forensics programme, UNODC, WHO and partners including EMCDDA collaborated on the analysis and reporting of trends on new psychoactive substances (NPS) as part of the UNODC early warning advisory on NPS. Between January and December 2023, there was an average of 17,699 sessions per month from 208 countries and territories in the portal. UNODC and OAS/CICAD jointly strengthened national early warning systems in Latin America and the Caribbean which resulted in an increased number of early warning notifications in the region. With regional forensic associations including the Asian Forensic Sciences Network and the European Network of Forensic Science Institutes, UNODC

organized the third Forensic Science Symposium (online) which brought together over 1,300 experts from over 100 countries.

### **Strengthening international cooperation based on the principle of common and shared responsibility**

62. The Informal Scientific Network (ISN), organized by UNODC and WHO, continues to provide a forum between academia and policy makers on topical issues relating to drug use, prevention, treatment and care of drug use disorders and comorbid health conditions. At the plenary session of the CND in March 2023, the ISN presented a statement on “Treatment of substance use disorders in prison settings”.

63. WHO and UNODC continued to co-chair the Inter-Agency Technical Working Group on Prevention of Drug Use, and Treatment and Care of Drug Use Disorders. Launched in 2022 the Working Group encourages cooperation and collaboration among international organizations in prevention and treatment of drug use disorders and related health conditions.

64. As a follow-up to the 2016 UNGASS on Drugs, a memorandum of understanding (MoU) was signed between UNODC and WHO to systematize the ongoing collaboration. In 2023, the time frame for implementation of the MoU was extended to 2027.

### **Alternative development; regional, interregional, and international cooperation on development-oriented balanced drug control policy; addressing socioeconomic issues**

65. In 2023, UNODC and UNIDO continued to collaborate in Colombia on a joint United Nations initiative providing technical assistance to almost 1,900 families under the national illicit crop substitution programme (PNIS) in North Santander. The initiative aims to develop alternative livelihoods, while strengthening producer organizations by supporting their business plans, their branding and marketing.

66. Within the United Nations Strategic Framework for Afghanistan (July 2023–December 2025), UNODC has increased its delivery capacity through the implementation of United Nations joint programmes with the support of the Special Trust Fund for Afghanistan. UNODC and UNDP have been collaborating in Afghanistan since 2017 on alternative development. In October 2023, UNODC signed MoU agreements with IOM and UN-Women to expand the scope of interventions and build on each agency’s areas of expertise and comparative advantage, with the support of national implementing partners.

67. In Brazil, a multi-agency alternative urban development project entitled Pernambuco Cooperation between UNODC, UNDP, UN-Habitat, and the Igarapé Institute continued to operate. Its main focus lies in supporting the design and implementation of public policies on crime and violence prevention with a direct impact on 184 municipalities in the state of Pernambuco.

68. In Brazil a partnership between UNODC, UNDP, and the National Secretariat on Drugs Policies and Asset Management established the Centre for Studies on Drugs and Social Community Development.<sup>16</sup> The centre has been developing evidence and human rights-based studies and analyses on drug policy guided by principles of alternative development, as well as various studies related to supply reduction. For example, in 2023, the centre published its findings on drug trafficking in the Amazon, on the characterization and presence of fentanyl in Brazil, and on supply and demand challenges related to synthetic cannabinoids in Brazilian states.

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<sup>16</sup> The centre replaces the former Centre of Excellence for Illicit Drug Supply Reduction, see <<https://shorturl.at/hmLR8>> [last accessed 22/02/24].