

## Resolution 62/6

### **Promoting measures to prevent transmission of HIV attributable to drug use among women and for women who are exposed to risk factors associated with drug use, including by improving access to post-exposure prophylaxis**

*The Commission on Narcotic Drugs,*

*Reaffirming* the commitments contained in the Single Convention on Narcotic Drugs of 1954 as amended by the 1972 Protocol,<sup>1</sup> the Convention on Psychotropic Substances of 1971<sup>2</sup> and the United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances of 1988,<sup>3</sup> in which States parties express concern for the health and welfare of humankind,

*Reaffirming also* the Universal Declaration of Human Rights,<sup>4</sup> which states in its article 25 that everyone has the right to a standard of living adequate for their health and well-being, including necessary social services,

*Recalling* the commitments of States parties in article 12 of the International Covenant on Economic, Social and Cultural Rights,<sup>5</sup> in which they recognize the right of everyone to the enjoyment of the highest attainable standard of physical and mental health,

*Recalling also* the Convention on the Elimination of All Forms of Discrimination against Women,<sup>6</sup> in particular its article 12, in which States parties to the Convention commit to take all appropriate measures to eliminate discrimination against women in the field of health care, in order to ensure, on a basis of equality of men and women, access to health-care services,

*Recalling further* the 2009 Political Declaration and Plan of Action on International Cooperation towards an Integrated and Balanced Strategy to Counter the World Drug Problem,<sup>7</sup> the Joint Ministerial Statement of the 2014 high-level review by the Commission on Narcotic Drugs of the implementation by Member States of the Political Declaration and Plan of Action<sup>8</sup> and the outcome document of the thirtieth special session of the General Assembly, entitled “Our joint commitment to effectively addressing and countering the world drug problem”,<sup>9</sup> in which Member States emphasized, inter alia, the need to promote effective, comprehensive, evidence-based demand reduction initiatives at all levels, covering, in accordance with national legislations and the three international drug control conventions, prevention, early intervention, treatment, care, recovery, rehabilitation, and social reintegration measures, as well as

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<sup>1</sup> United Nations, *Treaty Series*, vol. 976, No. 14152.

<sup>2</sup> *Ibid.*, vol. 1019, No. 14956.

<sup>3</sup> *Ibid.*, vol., 1582, No. 27627.

<sup>4</sup> General Assembly resolution 217 A (III).

<sup>5</sup> General Assembly resolution 2200 A (XXI), annex.

<sup>6</sup> United Nations, *Treaty Series*, vol. 1249, No. 20378.

<sup>7</sup> See *Official Records of the Economic and Social Council, 2009, Supplement No. 8* (E/2009/28), chap. I, sect. C.

<sup>8</sup> See *Official Records of the Economic and Social Council, 2014, Supplement No. 8* (E/2014/28), chap. I, sect. C.

<sup>9</sup> General Assembly resolution S-30/1, annex.

initiatives and measures aimed at minimizing the adverse drug-related public health and social consequences,

*Recalling* the recommendations contained in the outcome document of the thirtieth special session of the General Assembly of ensuring non-discriminatory access to health, care and social services in prevention, primary care and treatment programmes, including those offered to persons in prison or pretrial detention, which are to be on a level equal to those available in the community, and of ensuring that women, including detained women, have access to adequate health services and counselling and those particularly needed during pregnancy, and of mainstreaming a gender perspective into and ensuring the involvement of women in all stages of development, implementation, monitoring and evaluation of drug policies and programmes, developing and disseminating gender-sensitive and age-appropriate measures that take into account the specific needs of and circumstances faced by women and girls with regard to the world drug problem,

*Recalling also* its resolution 59/5 of 22 March 2016, and underlining the importance of taking into account the needs of and challenges faced by women and girls who use drugs or who are affected by the drug use of others and of mainstreaming a gender perspective into national drug policies,

*Recalling further* its resolution 60/8 of 17 March 2017, entitled “Promoting measures to prevent HIV and other blood-borne diseases associated with the use of drugs, and increasing financing for the global HIV/AIDS response and for drug use prevention and other drug demand reduction measures”,

*Recalling* its resolution 61/4 of 16 March 2018, entitled “Promoting measures for the prevention of mother-to-child transmission of HIV, hepatitis B and C and syphilis among women who use drugs”,

*Recalling also* its resolution 61/11 of 16 March 2018, entitled “Promoting non-stigmatizing attitudes to ensure the availability of, access to and delivery of health, care and social services for drug users”,

*Reaffirming* that the United Nations Office on Drugs and Crime is the leading entity of the United Nations system for addressing and countering the world drug problem and the convening agency for addressing HIV and drug use, and HIV in prison settings, within the Joint United Nations Programme on HIV/AIDS division of labour, in close partnership with the World Health Organization and the secretariat of the Joint United Nations Programme on HIV/AIDS and in collaboration with other co-sponsors of the Programme,

*Expressing its deep concern* that, according to the *World Drug Report 2018*, the prevalence of gender-based violence among women who use drugs is two to five times higher than among women who do not use drugs and that this factor contributes to the increased risk of infection with HIV and hepatitis C among women who use drugs.<sup>10</sup>

*Recalling* that among people who use drugs, the prevalence of HIV is higher among women,<sup>11</sup>

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<sup>10</sup> United Nations publication, Sales No. E.18.XI.9 (Booklet 5).

<sup>11</sup> *Ibid.*

*Noting* that women who use drugs face specific barriers to accessing treatment services for drug use disorders, as well as services for HIV and other health needs, including gender-based discrimination and violence,<sup>12</sup>

*Taking note* of the United Nations Office on Drugs and Crime publication entitled *Addressing the Specific Needs of Women who Inject Drugs: Practical Guide for Service Providers on Gender-Responsive HIV Services*, which recommends voluntary and informed access to HIV post-exposure prophylaxis, along with other prevention methods for women who use drugs, especially those who have recently shared injecting equipment and/or suffered sexual violence, as well as clinical follow-up,

*Recalling* that in the outcome document of the special session of the General Assembly on the world drug problem held in 2016,<sup>61</sup> Member States invited national authorities to consider, in accordance with their national legislation and the three international drug conventions, including in national prevention, treatment, care, recovery, rehabilitation and social reintegration measures and programmes, in the context of comprehensive and balanced drug demand reduction efforts, effective measures aimed at minimizing the adverse public health and social consequences of drug abuse, including appropriate medication-assisted therapy programmes, injecting equipment programmes, as well as antiretroviral therapy and other relevant interventions that prevent the transmission of HIV, viral hepatitis and other blood-borne diseases associated with drug use, and consider ensuring access to such interventions,

*Recalling also* the Political Declaration on HIV and AIDS: On the Fast Track to Accelerating the Fight against HIV and to Ending the AIDS Epidemic by 2030,<sup>13</sup> and resolving to provide effective measures aimed at minimizing the adverse public health and social consequences of drug abuse in accordance with national legislation and the three international drug conventions,

*Gravely concerned* about the social barriers, including poverty, that continue to hinder the access of women to treatment for drug use disorders and, in some cases, the challenge that Member States face in mobilizing sufficient resources for removing those barriers, and fully aware that women are disproportionately affected by the consequences of drug abuse, such as sexually transmitted infections, violence and drug-facilitated crime,

1. *Urges* Member States, in the context of addressing and countering the world drug problem, in particular the specific needs of women who use drugs, to strengthen their efforts and take measures to promote healthy lives and well-being for all and achieve gender equality, by contributing to ending the AIDS epidemic and eliminating viral hepatitis B and C, eliminating all forms of violence against women and girls, and strengthening the prevention and treatment of substance abuse, in line with the 2030 Agenda for Sustainable Development<sup>14</sup> in particular its Goals 3 and 5;

2. *Encourages* Member States, as appropriate, within their national and regional contexts, to promote, among relevant agencies and social

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<sup>12</sup> United Nations Office on Drugs and Crime, *Addressing the Specific Needs of Women who Inject Drugs: Practical Guide for Service Providers on Gender-Responsive HIV Services* (Vienna, 2016).

<sup>13</sup> General Assembly resolution 70/266, annex.

<sup>14</sup> General Assembly resolution 70/1.

services sectors, non-stigmatizing attitudes in the development and implementation of scientific evidence-based policies related to the availability of, access to and delivery of health, care and social services for drug users, including women and girls who use drugs or who are exposed to risk factors associated with drug use, and to reduce any possible discrimination, exclusion or prejudice that these people may encounter;

3. *Requests* Member States, as appropriate, within their national and regional contexts, to continue to enhance inclusiveness in developing relevant programmes and strategies, to seek opinions and contributions from women and girls who use drugs and from organizations and families and community members who work with them and support them, and to facilitate development of scientific evidence-based policies regarding the availability of, access to and delivery of services to women and girls who use drugs;

4. *Encourages* Member States to take into account the specific needs and possible multiple vulnerabilities of women drug offenders when imprisoned, in line with the United Nation Rules for the Treatment of Women Prisoners and Non-custodial Measures for Women Offenders (the Bangkok Rules);<sup>15</sup>

5. *Strongly encourages* Member States to improve access for women who use drugs to diagnosis and treatment of HIV/AIDS and viral hepatitis, including hepatitis C, including in the context of comprehensive drug demand reduction initiatives, and commends efforts taken by Member States in this regard, in accordance with national legislation and taking into account, inter alia, the United Nations Office on Drugs and Crime publication entitled *Addressing the Specific Needs of Women who Inject Drugs: Practical Guide for Service Providers on Gender-Responsive HIV Services* and the World Health Organization guidelines on HIV treatment;

6. *Calls upon* Member States, when initiating or providing scientific evidence-based treatment for drug use disorders to women to also offer and provide access to HIV combination prevention programmes, including timely access to post-exposure prophylaxis, and encourages Member States to also offer the voluntary and informed use of pre-exposure prophylaxis, when appropriate and in accordance with national legislation;

7. *Also calls upon* Member States to promote training and support for health professionals, including for all health staff in prisons and other custodial settings, relating to the prevention of HIV transmission among women who use drugs or are exposed to risk factors associated with drug use, especially those who are sexually assaulted;

8. *Further calls upon* Member States to offer women who use drugs, especially those who have recently shared injecting equipment, and/or have been sexually assaulted, access to health clinics and, where possible, assisted referral, and access to post-exposure prophylaxis, in accordance with national legislation and taking into account the United Nations Office on Drugs and Crime guidelines in the publication *Addressing the Specific Needs of Women who Inject Drugs: Practical Guide for Service Providers on Gender-Responsive HIV Services*;

9. *Calls upon* Member States to develop and implement strategies to help identify and respond to gender-based violence by providing direct

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<sup>15</sup> General Assembly resolution 65/229, annex.

support to women who use drugs or are exposed to risk factors associated with drug use and who experience sexual violence, including appropriate measures and protections as may be required to enable women who use drugs to report abuse;

10. *Encourages* Member States and other donors to continue to provide bilateral and other funding for the global HIV/AIDS response, including to the Joint United Nations Programme on HIV/AIDS, the United Nations Office on Drugs and Crime, World Health Organization and the Global Fund to Fight AIDS, Tuberculosis and Malaria, and to strive to ensure that such funding contributes to addressing the growing HIV/AIDS epidemic among people who use drugs;

11. *Requests* the United Nations Office on Drugs and Crime, as the convening agency of the Joint United Nations Programme on HIV/AIDS for matters relating to HIV/AIDS and drug use and to HIV/AIDS in prison settings, to continue to provide its leadership and guidance on those matters, in partnership with relevant United Nations entities and government partners and other relevant stakeholders, such as civil society, affected populations and the scientific community, as appropriate, and to continue to support Member States, upon request, in their efforts to increase their capacity and mobilize resources, including through national investment, for the provision of comprehensive HIV prevention and treatment programmes;

12. *Invites* Member States and other donors to provide extrabudgetary resources for the purposes described above, in accordance with the rules and procedures of the United Nations.