

9. *Encourages* Member States to continue sharing lessons learned, best practices and expertise, including through the Commission, and enhancing dialogues on development-oriented drug control policies and programmes, including on the implementation of the United Nations Guiding Principles on Alternative Development;

10. *Also encourages* Member States to engage in and promote partnerships with each other, as well as with all relevant stakeholders, including regional and international organizations, the private sector, civil society and financial institutions, in the implementation of alternative development projects and programmes;

11. *Requests* the Executive Director of the United Nations Office on Drugs and Crime to report to the Commission at its sixty-fifth session on the implementation of the present resolution;

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.

Resolution 64/3

Promoting scientific evidence-based, quality, affordable and comprehensive drug prevention, treatment, sustained recovery and related support services

The Commission on Narcotic Drugs,

Reaffirming the obligations contained in the Single Convention on Narcotic Drugs of 1961 as amended by the 1972 Protocol,¹⁴ the Convention on Psychotropic Substances of 1971¹⁵ and the United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances of 1988,¹⁶ in which States parties express concern for the health and welfare of humankind,

Reaffirming also the Universal Declaration of Human Rights,¹⁷ which states in its article 25 that everyone has the right to a standard of living adequate for their health and well-being, including medical care and necessary social services,

Recalling the International Covenant on Economic, Social and Cultural Rights,¹⁸ in particular its article 12, in which States parties to the Covenant recognize the right of everyone to the enjoyment of the highest attainable standard of physical and mental health,

Recalling also the 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,¹⁹ adopted at its sixty-second session in 2019, in which Member States committed themselves to safeguarding our future and 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 the implementation of balanced, integrated, comprehensive, multidisciplinary and scientific evidence-based responses to the world drug problem, placing the safety, health and well-being of all members of society, in particular youth and children, at the centre of their efforts,

Recalling further the outcome document of the thirtieth special session of the General Assembly, entitled “Our joint commitment to effectively addressing and

¹⁴ United Nations, *Treaty Series*, vol. 976, No. 14152.

¹⁵ Ibid., vol. 1019, No. 14956.

¹⁶ Ibid., vol. 1582, No. 27627.

¹⁷ General Assembly resolution 217 A (III).

¹⁸ General Assembly resolution 2200 A (XXI), annex.

¹⁹ See *Official Records of the Economic and Social Council, 2019, Supplement No. 8 (E/2019/28)*, chap. I, sect. B.

countering the world drug problem”,²⁰ in which Member States reiterated their commitment to promoting the health, welfare and well-being of all individuals, families, communities and society as a whole, and facilitating healthy lifestyles through effective, comprehensive, scientific evidence-based demand reduction initiatives at all levels, covering, in accordance with national legislation and the three international drug control conventions, prevention, early intervention, treatment, care, recovery, rehabilitation and social reintegration measures, as well as initiatives and measures aimed at minimizing the adverse public health and social consequences of drug abuse,

Recalling the Joint Ministerial Statement of the 2014 high-level review by the Commission of the implementation by Member States of the Political Declaration and Plan of Action on International Cooperation towards an Integrated and Balanced Strategy to Counter the World Drug Problem,²¹ in which Member States reaffirmed the need to further strengthen public health systems, particularly in the areas of prevention, treatment and rehabilitation, as part of a comprehensive and balanced approach to demand reduction based on scientific evidence,

Recalling also the Political Declaration and Plan of Action on International Cooperation towards an Integrated and Balanced Strategy to Counter the World Drug Problem²² of 2009, in which Member States were called upon to ensure that access to drug treatment that is affordable, culturally appropriate and based on scientific evidence is available and that drug dependence care services are included in health-care systems, whether public or private, with the involvement of primary and, where appropriate, specialized health-care services, in accordance with national legislation,

Recalling further the 2030 Agenda for Sustainable Development,²³ in particular the commitment to ensure healthy lives and promote well-being for all at all ages, and noting that efforts to strengthen drug prevention, treatment and recovery address this goal and constitute a step forward in its implementation,

Recalling the political declaration of the high-level meeting on universal health coverage, held in New York on 23 September 2019, entitled “Universal health coverage: moving together to build a healthier world”,²⁴ in which Member States recognized that universal health coverage implies that all people have access, without discrimination, to nationally determined sets of the needed promotive, preventive, curative, rehabilitative and palliative essential health services, and essential, safe, affordable, effective and quality medicines and vaccines, while ensuring that the use of these services does not expose the users to financial hardship, with a special emphasis on the poor, vulnerable and marginalized segments of the population,

Commending the collaboration between the United Nations Office on Drugs and Crime and the World Health Organization, leading, *inter alia*, to the publication of the *International Standards on Drug Use Prevention* and the *International Standards for the Treatment of Drug Use Disorders*, which compile scientific evidence-based recommendations that reflect best prevention and treatment practices for possible use by Member States, as well as the improvement of drug prevention, early intervention, treatment, care, sustained recovery and related support services, rehabilitation and social reintegration worldwide,

Recalling the operational recommendation contained in the outcome document of the thirtieth special session of the General Assembly to invite relevant national authorities to consider, in accordance with their national legislation and the three international drug control conventions, including in national prevention, treatment,

²⁰ General Assembly resolution [S-30/1](#), annex.

²¹ See *Official Records of the Economic and Social Council, 2014, Supplement No. 8* ([E/2014/28](#)), chap. I, sect. C.

²² See *Official Records of the Economic and Social Council, 2009, Supplement No. 8* ([E/2009/28](#)), chap. I, sect. C.

²³ General Assembly resolution [70/1](#).

²⁴ General Assembly resolution [74/2](#).

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 to consider ensuring access to such interventions, including in treatment and outreach services, prisons and other custodial settings, and promoting in that regard the use, as appropriate, of the technical guide for countries to set targets for universal access to HIV prevention, treatment and care for injecting drug users, issued by the World Health Organization, the United Nations Office on Drugs and Crime and the Joint United Nations Programme on HIV/AIDS,

Recognizing that drug dependence is a complex, multifactorial health disorder characterized by a chronic and relapsing nature with social causes and consequences that can be prevented and treated through, *inter alia*, scientific evidence-based, quality, effective and comprehensive drug prevention, treatment, sustained recovery and related support services and care and rehabilitation programmes, including community-based programmes, initiatives to address the adverse consequences of drug use and the social reintegration of individuals with substance use disorders and those in long-term recovery, including people experiencing homelessness who use drugs, through, *inter alia*, assistance for effective reintegration into the labour market and other support services, as appropriate,

Welcoming the revised edition of the *International Standards for the Treatment of Drug Use Disorders*, which underlines that, *inter alia*, scientific evidence-based treatment services should be affordable to people of different socioeconomic groups and levels of income, with minimized risk of financial hardship for those requiring the services,

Acknowledging that addressing and countering all aspects of the world drug problem remains a common and shared responsibility that should be addressed in a multilateral setting through effective and increased international cooperation and demands an integrated, multidisciplinary, mutually reinforcing, balanced, scientific evidence-based and comprehensive approach which takes into account the age- and gender-related and other needs of individuals,

Underlining the importance of increasing the availability, coverage, quality and affordability of scientific evidence-based prevention, treatment, including for comorbidities, sustained recovery and related support services that target relevant age, gender and risk groups, including women and vulnerable members of society, including children, adolescents, youth and elderly people, in multiple settings, such as schools, families, communities, workplaces, drug treatment and rehabilitation facilities, social services and criminal justice systems,

Convinced that prevention that is based on scientific evidence and on a rigorous process of adaptation to local, cultural and socioeconomic circumstances is a cost-effective approach that protects people, in particular children and youth, from drug use initiation and other risky behaviours and is therefore an investment in the health and well-being of individuals, in particular people experiencing homelessness and other vulnerable members of society, as well as families and communities and society as a whole,

Mindful of the importance of encouraging the voluntary engagement and participation of individuals with drug use disorders in treatment programmes, with informed consent, where consistent with national legislation, and developing and implementing scientific evidence-based outreach programmes and campaigns, involving affected populations, including those in long-term recovery, where appropriate, to prevent social marginalization and promote non-stigmatizing attitudes, as well as of implementing effective outreach to engage and maintain the engagement of people in treatment, care, sustained recovery and related support services and

taking measures to facilitate access to such services, including treatment for comorbidities, and to expand capacity,

Reaffirming the importance of promoting appropriate mechanisms for ensuring compliance, quality assurance or accreditation of drug treatment services, such as effective oversight of drug treatment and rehabilitation facilities by competent domestic authorities and the supervision by appropriately trained and qualified professionals, in order to ensure the adequate quality of drug treatment, sustained recovery and related support and rehabilitation services, promote continuous improvement and prevent any possible acts of cruel, inhuman or degrading treatment or punishment, in accordance with domestic legislation and applicable international law,

Aware of the need to adopt an integrated approach in designing, implementing, monitoring and evaluating drug prevention, treatment, sustained recovery and related support services, including by strengthening partnerships and cooperation among national authorities, in particular in the health, education, social, justice and law enforcement sectors, and between governmental agencies and other relevant stakeholders, as appropriate, including by involving academia, the scientific community, the private sector, civil society, affected populations and relevant regional, international and non-governmental organizations, taking into account country-specific conditions,

Stressing the importance of ensuring non-discriminatory access to health, care and social services on prevention, primary care, treatment, including for comorbidities, sustained recovery and related support services, 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 give special attention to the specific needs of, inter alia, women, youth and vulnerable members of society in prison settings, while fully respecting all human rights and fundamental freedoms,

Deeply concerned about the negative impacts of the coronavirus disease (COVID-19) pandemic on traditional demand reduction infrastructure in terms of providing prevention, early intervention, treatment, care, recovery, rehabilitation and social reintegration measures, as well as measures aimed at minimizing the adverse public health and social consequences of drug abuse, at least at the same level as provided before the COVID-19 pandemic,

1. *Encourages* Member States to continue developing and implementing scientific evidence-based, quality, affordable and comprehensive drug prevention, treatment, including for comorbidities, care, sustained recovery and related support services, to consider measures aimed at minimizing the adverse public health and social consequences of drug abuse, in line with the revised editions of the *International Standards on Drug Use Prevention* and the *International Standards for the Treatment of Drug Use Disorders*, and to continue monitoring and evaluating these policies and services, in accordance with national legislation, in order, where appropriate, to protect the health, safety, welfare and well-being of individuals, families, vulnerable members of society, with the aim of preventing social marginalization, as well as communities and society as a whole, giving special attention to women, children and youth, and accounting for specific age and gender needs, with full respect for all human rights and fundamental freedoms and the inherent dignity of all individuals;

2. *Invites* Member States to establish and strengthen cooperation and the exchange of information among national authorities, particularly in the health, education, social, justice and law enforcement sectors, and to coordinate with and take into account, as appropriate, the inputs of academia, the scientific community, the private sector, civil society, affected populations and relevant international, regional and non-governmental organizations, with a view to developing and implementing scientific evidence-based, quality, affordable and comprehensive drug prevention, treatment, care, sustained recovery and related support services;

3. *Encourages* Member States to develop quality assurance mechanisms for drug prevention, treatment, including for comorbidities, sustained recovery and related support services with a view to ensuring continuous improvement, through, *inter alia*, effective supervision of drug treatment and rehabilitation facilities by competent domestic authorities, including to prevent any possible acts of cruel, inhuman or degrading treatment or punishment, in accordance with national legislation and applicable international law;

4. *Also encourages* Member States to promote and implement effective criminal justice responses to drug-related crimes to bring perpetrators to justice that ensure legal guarantees and due process safeguards pertaining to criminal justice proceedings, including practical measures to uphold the prohibition of arbitrary arrest and detention and of torture and other cruel, inhuman, degrading treatment or punishment and to eliminate impunity, in accordance with relevant and applicable international law and taking into account United Nations standards and norms on crime prevention and criminal justice, and to ensure timely access to legal aid and the right to a fair trial;

5. *Further encourages* Member States to promote, improve and facilitate, in accordance with domestic legislation and applicable international law, access to scientific evidence-based, quality, affordable and comprehensive drug prevention, treatment, including for comorbidities, care, sustained recovery and related support services, on a voluntary basis, and to promote non-stigmatizing attitudes, with a view to reducing any possible discrimination, exclusion or prejudice;

6. *Urges* Member States to ensure the availability of and access to controlled substances for medical and scientific purposes, while preventing their diversion;

7. *Encourages* Member States to provide adequate, comprehensive and continued evidence-based training, strengthen professional knowledge and skills and provide capacity-building to health professionals, social workers and other relevant specialists working in the areas of drug prevention, treatment, including for comorbidities, sustained recovery and related support services, at different levels of education, including through university curricula and in programmes of continuing education, in order to ensure the quality and effectiveness of drug prevention and treatment services and promote non-stigmatizing attitudes, to ensure the availability of, access to and delivery of health, care and social services to drug users and to ensure that those specialists continue to carry out their tasks in an ethical manner and with a respectful and non-judgmental approach;

8. *Notes* the role of law enforcement officials in supporting drug prevention services, in accordance with the *International Standards on Drug Use Prevention*, jointly developed by the United Nations Office on Drugs and Crime and the World Health Organization, and encourages Member States to provide those officials with appropriate evidence-based training, strengthen professional knowledge and skills, and provide capacity-building in that regard;

9. *Invites* Member States to consider, in accordance with national legislation, involving law enforcement officials in encouraging drug users to seek treatment, care, rehabilitation and sustained recovery and related support services on a voluntary basis, by providing them with the appropriate aid and assistance, and encourages Member States to provide those officials with appropriate evidence-based training, strengthen their professional knowledge and skills and provide capacity-building in that regard;

10. *Also invites* Member States to exchange, including through the Commission, information, good practices and experiences in designing, implementing, monitoring and evaluating drug prevention, treatment, sustained recovery and related support services, in order to promote international cooperation in this regard and to further advance the development of quality, affordable, scientific evidence-based and comprehensive drug prevention, treatment, sustained recovery and related support services, and calls upon the United Nations Office on Drugs and

Crime to facilitate such exchanges, and to continue and enhance, as appropriate, its collaboration with the World Health Organization, other relevant United Nations entities, international and regional organizations, within their respective mandates, including through joint programmes and partnerships;

11. *Encourages* Member States to mainstream an age and gender perspective into all stages of development, implementation, monitoring and evaluation of drug prevention, treatment, sustained recovery and related support services, in order to ensure their quality, inclusivity, safety and efficacy, and ensure that those services, as appropriate, are tailored to the different needs and circumstances of all people who could benefit from such services and measures, in particular women and girls;

12. *Also encourages* Member States to promote, improve and facilitate non-discriminatory access to health, care, and social services on prevention, primary care, treatment, including for comorbidities, sustained recovery and related support services, as part of their essential health-care systems, including those offered to persons in prison or pretrial detention, which are to be on a level equal to those available in the community, giving special attention to the specific needs of, inter alia, women, youth and vulnerable members of society, and to consider providing in appropriate cases of a minor nature, as alternatives or in addition to conviction or punishment, measures such as treatment, education, aftercare, rehabilitation or social reintegration of the offender, in accordance with the three international drug conventions and with due regard for national, constitutional, legal and administrative systems;

13. *Further encourages* Member States to promote, improve and facilitate the availability of and access to scientific evidence-based, quality, affordable and comprehensive drug prevention, treatment and sustained recovery and related support services and initiatives to address the adverse consequences of drug use, in accordance with national legislation, including during the coronavirus disease (COVID-19) pandemic, at least at the same level as provided before the COVID-19 pandemic, and to strengthen the capacity of their health, care and social services on prevention, primary care, treatment, including for comorbidities, sustained recovery and related support services, as part of their essential health-care systems, including by considering establishing and strengthening partnerships with civil society, the private sector and other relevant stakeholders;

14. *Welcomes* the efforts made by Member States to promote access to scientific evidence-based, quality, affordable and comprehensive prevention, treatment, sustained recovery and related support services during the COVID-19 pandemic through innovative approaches such as e-health platforms and procedures to prevent drug abuse and provide medications, counselling and consultations, including telemedicine, and encourages Member States to collect and share information on the effectiveness of and best practices for implementing such interventions;

15. *Requests* the United Nations Office on Drugs and Crime, in collaboration with Member States, relevant United Nations entities, international and regional organizations, within their respective mandates, civil society, affected populations and other relevant stakeholders, and subject to the availability of extrabudgetary resources, to prepare a comprehensive report on the quality of drug prevention, treatment, sustained recovery and related support services, as well as other health-related measures, in line with the *International Standards on Drug Use Prevention* and the *International Standards on the Treatment of Drug Use Disorders* developed by the United Nations Office on Drugs and Crime and the World Health Organization, in order to ensure the continuous improvement of such services and with the aim of understanding the possible linkages between drug use and crime, health and socioeconomic factors;

16. *Also requests* the United Nations Office on Drugs and Crime, subject to the availability of extrabudgetary resources and in collaboration with other relevant United Nations entities and relevant international and regional organizations, within

their respective mandates, and in cooperation with civil society and other relevant stakeholders, to assist Member States, upon request, in developing and implementing scientific evidence-based public information campaigns on evidence-based drug prevention, treatment, sustained recovery and related support services, in line with the *International Standards on Drug Use Prevention* and the *International Standards on the Treatment of Drug Use Disorders*, in order to ensure that such services are recognized and easily accessible to the population;

17. *Further requests* the United Nations Office on Drugs and Crime to continue providing, subject to the availability of extrabudgetary resources, technical assistance to Member States, in particular developing countries, upon request, for the development, implementation, monitoring and evaluation of scientific evidence-based, quality, affordable and comprehensive drug prevention, treatment, sustained recovery and related support services;

18. *Encourages* the United Nations Office on Drugs and Crime to continue and enhance its collaboration, as appropriate, with the World Health Organization, other relevant United Nations entities and relevant international and regional entities and organizations, including through joint programmes and partnerships, within their respective mandates;

19. *Encourages* Member States to consider providing technical assistance, upon request, for these purposes through bilateral and multilateral channels;

20. *Requests* the Executive Director of the United Nations Office on Drugs and Crime to report to the Commission at its sixty-sixth session on the implementation of the present resolution;

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

Resolution 64/4

Improving data collection on, and responses to, the harmful effects of the non-medical use of pharmaceuticals containing narcotic drugs, psychotropic substances or new psychoactive substances

The Commission on Narcotic Drugs,

Reaffirming its commitment to the goals and objectives of the Single Convention on Narcotic Drugs of 1961 as amended by the 1972 Protocol,²⁵ the Convention on Psychotropic Substances of 1971²⁶ and the United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances of 1988,²⁷ in which States parties express concern for the health and welfare of humankind,

Recalling the 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 Problem²⁸ of 2019, in which Member States noted with concern persistent and emerging challenges related to the world drug problem, including that the adverse health consequences of and risks associated with new psychoactive substances have reached alarming levels, that synthetic opioids and the non-medical use of prescription drugs pose increasing risks to public health and safety, as well as scientific, legal and regulatory challenges, including with regard to the scheduling of substances, and that the geographical

²⁵ United Nations, *Treaty Series*, vol. 976, No. 14152.

²⁶ Ibid., vol. 1019, No. 14956.

²⁷ Ibid., vol. 1582, No. 27627.

²⁸ See *Official Records of the Economic and Social Council*, 2019, Supplement No. 8 (E/2019/28), chap. I, sect. B.