counter and dismantle organized criminal groups, including those operating transnationally;

15. *Also encourages* Member States, with the assistance of the International Narcotics Control Board, as appropriate, to provide adequate training to the relevant staff of competent authorities about the information tools developed by the International Narcotics Control Board through which competent authorities may learn about the extent and level of legal controls in participating States, as made available by the Board, and invites the competent authorities of Member States to provide such information as they deem appropriate to the relevant stakeholders in the chemical industry, with a view to increasing their level of awareness of the legal and regulatory requirements of other Member States;

16. *Encourages* the United Nations Office on Drugs and Crime, in close cooperation with Member States and in consultation with the International Narcotics Control Board and other relevant United Nations entities, as appropriate and within their existing mandates, to continue to develop the United Nations Toolkit on Synthetic Drugs in order to include information and resources on measures to address the diversion of non-scheduled chemicals frequently used in the illicit manufacture of drugs and the proliferation of designer precursors, and to operationalize and disseminate the information about the interventions included in the Toolkit by incorporating it, as appropriate, into the technical assistance and capacity-building programmes of the Office;

17. *Requests* the United Nations Office on Drugs and Crime, within its existing mandate, to provide capacity-building, recommendations and assistance to Member States upon request, including with regard to making use of the recommendations contained in the International Narcotics Control Board guidance document entitled “Proliferation of non-scheduled chemicals and designer precursors: options for global action”, in accordance with domestic law, in order to take appropriate measures to address the diversion of non-scheduled chemicals frequently used in the illicit manufacture of drugs and the proliferation of designer precursors, and invites the International Narcotics Control Board, within its treaty-based mandate, to continue providing assistance to Member States in this regard;

18. *Also requests* the United Nations Office on Drugs and Crime to assist Member States, upon request, in addressing their challenges in addressing the diversion of non-scheduled chemicals frequently used in the illicit manufacture of drugs and the proliferation of designer precursors by providing technical assistance, equipment and technology, along with necessary training;

19. *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 65/4**

**Promoting comprehensive and scientific evidence-based early prevention**

*The Commission on Narcotic Drugs,*

*Reaffirming* its commitment to achieving the goals and objectives of, and implementing the obligations arising from, the Single Convention on Narcotic Drugs of 1961 as amended by the 1972 Protocol, the Convention on Psychotropic Substances of 1971 and the United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances of 1988,

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32 Ibid., vol. 1019, No. 14956. 
33 Ibid., vol. 1582, No. 27627.
Deeply concerned by the threat to the health and welfare of humankind posed by narcotic drugs and psychotropic substances, and the steadily increasing inroads into various social groups made by illicit traffic in narcotic drugs and psychotropic substances, and particularly by the fact that children are used in many parts of the world as an illicit drug consumers market and for purposes of illicit production, distribution and trade in narcotic drugs and psychotropic substances, which entails a danger of incalculable gravity,

Reaffirming its unwavering commitment to ensuring that all aspects of demand reduction and related measures, supply reduction and related measures, and international cooperation are addressed in full conformity with the purposes and principles of the Charter of the United Nations, international law and the Universal Declaration of Human Rights,34 with full respect for the sovereignty and territorial integrity of States, the principle of non-intervention in the internal affairs of States, all human rights, fundamental freedoms, the inherent dignity of all individuals and the principles of equal rights and mutual respect among States,

Underscoring, in particular, articles 25 and 26 of the Universal Declaration of Human Rights, which state that everyone has the right to a standard of living adequate for their health and well-being, including necessary social services, and that everyone has the right to education,

Recalling the commitments made by States parties to the Convention on the Rights of the Child,35 in article 33 of which it is stated that States parties should take all appropriate measures, including legislative, administrative, social and educational measures, to protect children from the illicit use of narcotic drugs and psychotropic substances, as defined in the relevant international treaties, and to prevent the use of children in the illicit production of and trafficking in such substances,

Acknowledging that young people may be at increased risk of adverse consequences when exposed to the non-medical use of drugs by others, and reiterating the need to develop healthy and secure family and social environments,

Recalling the commitment of Member States in 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 Problem36 of 2019 to effectively address and counter the world drug problem, which requires concerted and sustained action at the national and international levels, including accelerating the implementation of existing drug policy commitments,

Recalling the commitments contained in the outcome document of the thirtieth special session of the General Assembly, held in 2016, entitled “Our joint commitment to effectively addressing and countering the world drug problem”, 37 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 on International Cooperation towards an Integrated and Balanced Strategy to Counter the World Drug Problem38 and the Political Declaration and Plan of Action on International Cooperation towards an Integrated and Balanced Strategy to Counter the World Drug Problem39 of 2009,

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34 General Assembly resolution 217 A (III).
37 General Assembly resolution S-30/1, annex.
Recalling also the 2030 Agenda for Sustainable Development, 40 in particular Sustainable Development Goal 3, on ensuring healthy lives and promoting well-being for all at all ages, and noting that efforts to strengthen drug prevention address this Goal and constitute a step forward in its implementation,

Recalling also its resolution 57/3 of 21 March 2014, in which it highlighted that prevention based on scientific evidence and on a process of adaptation to local culture and socioeconomic circumstances is the most cost-effective approach to preventing drug use and other risky behaviours and is therefore an investment in the well-being of children, adolescents, youth, families and communities,

Recalling further its resolution 61/2 of 16 March 2018 on strengthening efforts to prevent drug abuse in educational settings, in which it noted with appreciation the ongoing efforts by Member States to prevent drug use among children and youth in educational settings, including through effective, scientific evidence-based and context-sensitive awareness-raising and prevention programmes and recognized the need to intensify those efforts, and invited Member States to increase, within their capacity, the availability, coverage and quality of gender-sensitive, scientific evidence-based prevention measures and tools in multiple settings reaching children and youth through drug abuse prevention programmes and public awareness-raising campaigns,

Reiterating that in its resolution 61/9 of 16 March 2018, it had reaffirmed that taking appropriate measures to protect children from the dangers, risks and consequences of the use of illicit drugs and trafficking is conducive to the development and well-being of children, and invited Member States to consider the use of the International Standards on Drug Use Prevention and the scientific evidence base to formulate effective drug use prevention programmes and strategies aimed at children,

Recalling its resolution 63/4 of 6 March 2020, in which it acknowledged the contribution of young people and youth-based associations and volunteer organizations in the prevention of non-medical use of drugs, and underlined the importance of taking their experience into consideration in the development, implementation and evaluation of relevant scientific and evidence-based national programmes and strategies,

Reaffirming its resolution 63/2 of 6 March 2020 on promoting and improving the collection and analysis of reliable and comparable data to strengthen balanced, integrated, comprehensive, multidisciplinary and scientific evidence-based responses to the world drug problem, in which it called upon Member States to analyse their policies and responses, including, inter alia, regarding demand reduction and cross-cutting issues such as drugs and human rights, youth, women, children, vulnerable members of society and communities, by gathering scientifically robust data on their effectiveness and efficiency in addressing and countering the world drug problem,

Recalling its resolution 64/3 of 16 April 2021 on promoting scientific evidence-based, quality, affordable and comprehensive drug prevention, treatment, sustained recovery and related support services, in which it underlined the importance of increasing the availability, coverage, quality and affordability of scientific evidence-based prevention,

Acknowledging the important advances made in prevention science, establishing prevention as one of the main components of comprehensive, scientific evidence-based demand-reduction initiatives to address the non-medical use of controlled drugs, and also acknowledging that effective early prevention strategies and measures focused on addressing, inter alia, adverse childhood experiences as well as individual and environmental, including social, risk and protective, factors, contribute significantly to the positive engagement of children, youth and adults with their families and in educational settings, workplaces and communities,

40 General Assembly resolution 70/1.
Reaffirming the determination of Member States to address and counter the world drug problem and to actively promote a society free of drug abuse in order to help to ensure that all people can live in health, dignity and peace, with security and prosperity, and also reaffirming their determination to address public health, safety and social problems resulting from drug abuse,

Noting with appreciation the publication of the International Standards on Drug Use Prevention, developed by the United Nations Office on Drugs and Crime in collaboration with the World Health Organization, and welcoming the second updated edition, while noting that the general aim of substance use prevention is the healthy and safe development of children and youth so that they can realize their talents and potential by developing skills and opportunities to choose healthy lifestyles and that effective prevention contributes significantly to the positive engagement of children, youth and adults with their families and in their schools, workplaces, communities and society as a whole,

Expressing appreciation for the ongoing work and initiatives of the United Nations Office on Drugs and Crime, such as the International Standards on Drug Use Prevention and capacity-building initiatives that seek to promote family-, school- and community-based prevention programmes, such as the “Families UNITed” and “Strong families” programmes and the Youth Initiative, including the annual Youth Forum, held since 2012 on the margins of the sessions of the Commission, and the “Listen first” initiative,

Noting with appreciation the ongoing work and initiatives of other relevant international organizations and civil society, such as the universal prevention curriculum, to support Member States, as applicable, in the development and implementation of scientific evidence-based programmes and policies on early prevention,

Noting also with appreciation the publication in 2020 by the United Nations Office on Drugs and Crime of the “Handbook on youth participation in drug prevention work”, which seeks to motivate Member States to provide opportunities for young people to become involved, as appropriate, in the development and implementation of appropriate scientific evidence-based drug use prevention programmes that affect youth, as part of a comprehensive substance use prevention system,

1. Encourages Member States to provide appropriate resources for and put greater emphasis on scientific evidence-based early prevention, encompassing prenatal care, infancy and early and middle childhood, including through a cross-sectoral, multidisciplinary and multi-stakeholder approach, as appropriate, and taking into account gender- and age-specific needs as well as the impacts of individual and environmental, including social, risk and protective, factors, on health, using the International Standards on Drug Use Prevention to formulate effective early prevention programmes and strategies aimed at children by identifying and reducing risk factors and enhancing protective factors through the systematic inclusion of social and emotional learning interventions that cover family and parenting skills, early childhood education and personal and social skills education, and prevention education based on social competence and influence, targeting children and youth in multiple settings and reaching young people in educational settings and through family or community interventions aimed at promoting a healthy environment;

2. Calls upon Member States to facilitate access to comprehensive, scientific evidence-based demand reduction services and related measures, including early prevention, and to expand their capacity and availability to vulnerable members of society, especially children, in socially and economically marginalized situations and in the context of the coronavirus disease (COVID-19) pandemic, as well as in situations of armed conflict or humanitarian disaster, while increasing possibilities to promote healthy lifestyles and addressing individual and environmental, including social, risk and protective, factors, through broader social policy in accordance with national legislation;
3. **Encourages** Member States to ensure, where possible, that all children at particular risk of initiating drug use, including those of parents and carers with substance use disorders, are provided with direct support and given access to appropriate early prevention and health-care services, while promoting non-stigmatizing attitudes, in order to secure the highest attainable standard of physical and mental health and increased equity in health, and to develop preventive health care guidance for parents and carers, family planning education and services and prenatal and postnatal health care, in accordance with their domestic legislation and national drug control programmes and strategies;

4. **Calls upon** Member States to take appropriate measures to prevent the use of children in drug-related crime;

5. **Encourages** Member States to apply the key guidance and recommendations, including on early prevention, contained in the latest edition of the United Nations Office on Drugs and Crime and World Health Organization *International Standards on Drug Use Prevention*, in the development, implementation and evaluation of relevant scientific evidence-based national programmes and strategies;

6. **Invites** Member States and the United Nations Office on Drugs and Crime to continue monitoring and evaluating early prevention policies and services aimed at protecting the health, safety, welfare and well-being of individuals, families, communities and society as a whole through effective age-appropriate and gender-sensitive prevention interventions and policies, taking into account the specific needs of children and youth, with full respect for all human rights and fundamental freedoms and the inherent dignity of all individuals in the context of drug programmes, strategies and policies;

7. **Invites** Member States to develop and implement early prevention policies and programmes which promote healthy and secure family skills, social contexts and environments that protect young people from, and help prevent adverse consequences of exposure to, the non-medical use of drugs of others;

8. **Requests** the United Nations Office on Drugs and Crime to continue, upon request, to support Member States by providing technical assistance and capacity-building for programmes in family, community, educational and other health- and social-care settings for the purpose of early prevention, and also requests the Office to assist Member States in conducting and promoting research and data collection in educational settings in this regard to better understand the challenge of drug use initiation among children and youth, including protective and risk factors, and respond to it more effectively;

9. **Also encourages** Member States, in cooperation with universities, schools and other educational institutions, as well as civil society and relevant United Nations entities, international organizations and programmes, in accordance with their mandates, to develop and implement scientific evidence-based prevention programmes, including through the universal prevention curriculum, that target early childhood and the family context and include guidance on effective early prevention strategies in families, communities and other health-care, educational and social-care settings;

10. **Encourages** Member States to promote the exchange of scientific evidence-based good practices, challenges and experiences in early prevention, and calls upon the United Nations Office on Drugs and Crime to facilitate such exchange;

11. **Calls upon** Member States to mainstream a gender perspective into the development, implementation and evaluation of drug prevention and health promotion efforts within the framework of domestic policies relating to early prevention;

12. **Decides** to further discuss and better address areas in early prevention where scientific knowledge is still limited, and requests the United Nation Office on Drugs and Crime, in consultation with Member States and other relevant stakeholders,
to develop guidelines and recommendations to help Member States and other relevant international and civil society organizations, including youth-led organizations, to make best use of the International Standards on Drug Use Prevention for the promotion and implementation of scientific evidence-based early prevention programmes, in particular those focused on addressing the impact of adverse childhood experiences, as well as individual and environmental, including social risk and protective, factors, with a focus on early prevention responses and interventions;

13. Requests the Executive Director of the United Nations Office on Drugs and Crime to report to the Commission on Narcotic Drugs at its sixty-sixth session on the measures taken and on the progress achieved in the implementation of the present resolution;

14. 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.

Decision 65/1

Inclusion of brorphine in Schedule I of the Single Convention on Narcotic Drugs of 1961 as amended by the 1972 Protocol

At its 9th meeting, on 16 March 2022, the Commission decided by 49 votes to none, with no abstentions, to include brorphine in Schedule I of the Single Convention on Narcotic Drugs of 1961 as amended by the 1972 Protocol.

Decision 65/2


At its 9th meeting, on 16 March 2022, the Commission decided by 49 votes to none, with no abstentions, to include metonitazene in Schedule I of the 1961 Single Convention on Narcotic Drugs of 1961 as amended by the 1972 Protocol.

Decision 65/3

Inclusion of eutylone in Schedule II of the Convention on Psychotropic Substances of 1971

At its 9th meeting, on 16 March 2022, the Commission decided by 49 votes to none, with no abstentions, to include eutylone in Schedule II of the Convention on Psychotropic Substances of 1971.

Decision 65/4

Inclusion of 4-AP in Table I of the United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances of 1988

At its 9th meeting, on 16 March 2022, the Commission decided by 49 votes to none, with no abstentions, to include 4-AP in Table I of the United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances of 1988.