



# Economic and Social Council

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## Commission on Narcotic Drugs

### Sixty-first session

Vienna, 12–16 March 2018

Item 7 of the provisional agenda\*

### Follow-up to the special session of the General Assembly on the world drug problem held in 2016, including the seven thematic areas of the outcome document of the special session

#### Canada and Uruguay: draft resolution

### Removing stigma as a barrier to the availability and delivery of health, care and social services for people who use drugs

*The Commission on Narcotic Drugs,*

*Concerned* by the effect of stigmatization on the availability and delivery of health, care and social services for people who use drugs,

*Mindful* of our commitment to addressing the world drug problem to help ensure that all people can live in health, dignity and peace, with security and prosperity, and reaffirming our determination to address public health, safety and social problems that can result from drug use,

*Recognizing*, as part of a comprehensive, integrated and balanced approach to addressing and countering the world drug problem, that appropriate emphasis should be placed on individuals, families, communities and society as a whole, with a view to promoting and protecting the health, safety and well-being of all humanity,

*Guided* by the operational recommendation contained in 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>1</sup> to prevent social marginalization and promote non-stigmatizing attitudes, which may include taking measures to remove stigmatization as a barrier to the availability and delivery of health, care and social services for people who use drugs,

*Guided also* by the reaffirmation contained in the outcome document of the thirtieth special session of the General Assembly of the need to strengthen cooperation between the United Nations Office on Drugs and Crime and other United Nations entities, within their respective mandates, in their efforts to support Member States in the implementation of international drug control treaties in accordance with applicable human rights obligations and to promote protection of and respect for

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\* E/CN.7/2018/1.

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



human rights and the dignity of all individuals in the context of drug policies and laws, strategies and programmes,

*Recalling* the operational recommendation contained in the outcome document of the thirtieth special session of the General Assembly to promote and strengthen regional and international cooperation in developing and implementing treatment-related initiatives, enhance technical assistance and capacity-building and ensure non-discriminatory access to a broad range of interventions, including psychosocial, behavioural and medication-assisted treatment, as appropriate and in accordance with national legislation, as well as to rehabilitation, social reintegration and recovery-support programmes, including access to such services in prisons and after imprisonment, giving special attention to the specific needs of women, children and youth in this regard,

*Recalling also* the operational recommendation contained in the outcome document of the thirtieth special session of the General Assembly to ensure 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 ensure that women, including detained women, have access to adequate health services and counselling, including those particularly needed during pregnancy,

*Acknowledging* the 2030 Agenda for Sustainable Development,<sup>2</sup> in which Heads of State and Government pledged that no one would be left behind in the pursuit of the goals set out in that Agenda, and recalling their commitment to ending, by 2030, the epidemics of AIDS and tuberculosis and to combating viral hepatitis and other communicable diseases, and to strengthening the prevention and treatment of substance use disorders,

*Recognizing* that marginalization, stigmatizing attitudes, discrimination and fear of social, employment-related or legal repercussions may dissuade many who need help from accessing it and lead those who are in stable long-term recovery from a substance use disorder to avoid disclosure of their status as a person in recovery from addiction,

*Underlining* the conclusions and recommendations contained in the report of the United Nations High Commissioner for Human Rights entitled “Study on the impact of the world drug problem on the enjoyment of human rights”,<sup>3</sup> which state that the right to health at international law should be protected by ensuring that persons who use drugs have access to health-related information and treatment on a non-discriminatory basis,

1. *Calls upon* Member States to recognize that stigmatization occurs when a person who uses drugs is subject to discrimination or prejudice when seeking or receiving health, care and social services;

2. *Invites* Member States to recognize that when language is applied that describes a person who uses drugs in a manner that encourages or can lead to discrimination or prejudice, it is considered stigmatizing language;

3. *Encourages* Member States, within their national and regional contexts, to promote within their relevant agencies the use of non-stigmatizing language in the development of evidence-based policies related to the availability and delivery of health, care and social services for people who use drugs;

4. *Requests* Member States, within their national and regional contexts, to promote within their relevant agencies, programmes and strategies, particularly those involved in responding to drug use, the meaningful inclusion of people who use drugs, and people who provide support to people who use drugs, in the development of

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<sup>2</sup> General Assembly resolution 70/1.

<sup>3</sup> A/HRC/30/65.

evidence-based policies regarding the availability and delivery of health, care and social services for people who use drugs;

5. *Urges* Member States, through bilateral, regional and international cooperation, to include in their existing training programmes for agencies in the areas of health, care and social services, an awareness of stigmatization of people who use drugs and measures to remove stigmatization in the implementation of these services;

6. *Also urges* Member States to include in their existing training programmes the effect of stigmatization on access and delivery of services to people who use drugs, including raising awareness among their law enforcement, border control and other relevant officials with regard to respecting the rights of all persons, without discrimination on any ground;

7. *Urges* the United Nations Office on Drugs and Crime, in cooperation with other relevant regional, interregional and international organizations and Member States, to integrate awareness of stigmatization into existing training programmes for agencies in the areas of health, care and social services, and training programmes for law enforcement, border control and other relevant officials, where appropriate;

8. *Calls upon* the United Nations Office on Drugs and Crime to continue coordinating efforts with other relevant United Nations organizations, bodies and agencies, in particular the World Health Organization, the Human Rights Council and the Joint United Nations Programme on HIV/AIDS, to support an increase in awareness of stigmatization and approaches to remove stigmatization in the implementation of health, care and social services for people who use drugs and to ensure respect for the human rights and dignity of all individuals in the context of drug programmes, strategies and policies;

9. *Requests* the Secretariat to report to the Commission on Narcotic Drugs at its sixty-third session on the implementation of the present resolution, including on how Member States have incorporated non-stigmatizing language in their respective evidence-based policies related to the availability and delivery of health, care and social services for people who use drugs.

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