



# Economic and Social Council

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## Commission on Narcotic Drugs

### Sixty-seventh session

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Agenda item 6

### **Follow-up to the implementation at the national, regional and international levels of all commitments, as reflected in the Ministerial Declaration of 2019, to address and counter the world drug problem**

**Chile, Dominican Republic, El Salvador, Germany and Norway: revised draft resolution**

### **Promoting recovery and related support services for people with drug use disorders**

*The Commission on Narcotic Drugs,*

*Reaffirming* the commitment of States parties to achieving the goals and objectives of and implementing the obligations contained in the Single Convention on Narcotic Drugs of 1961 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 expressed their concern for the health and welfare of humankind,

*Reaffirming also* the Universal Declaration of Human Rights,<sup>4</sup> which states in its articles 22 to 25, inter alia, that everyone has the right to social security, to work, to leisure and to a standard of living adequate for the health and well-being of themselves and their families, including medical care and necessary social services,

*Recalling* the commitments of Member States related to recovery and related support services contained 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 Problem<sup>5</sup> of 2019, as well as those 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”,<sup>6</sup> the Joint Ministerial Statement of the 2014 high-level review by the Commission on

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

<sup>6</sup> General Assembly resolution S-30/1, annex.



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 Problem<sup>7</sup> and the Political Declaration and Plan of Action on International Cooperation towards an Integrated and Balanced Strategy to Counter the World Drug Problem<sup>8</sup> of 2009,

*Recalling also* the outcome document of the thirtieth special session of the General Assembly, 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 to 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 use disorders,

*Recalling further* its resolution 57/4 of 21 March 2014, entitled “Supporting recovery from substance use disorders”, its resolution 59/5 of 22 March 2016, entitled “Mainstreaming a gender perspective in drug-related policies and programmes”, and its resolution 64/3 of 16 April 2021, entitled “Promoting scientific evidence-based, quality, affordable and comprehensive drug prevention, treatment, sustained recovery and related support services”,

*Recalling* its resolution 64/5 of 16 April 2021, in which Member States were called upon, consistent with their national legislation and contexts, to facilitate non-discriminatory and voluntary access to drug-related prevention, treatment, education, care, sustained recovery, rehabilitation, social reintegration and related support services for people who may face obstacles when accessing those services, including those impacted by social marginalization, while mainstreaming a gender perspective in the development and implementation of those services,

*Recognizing* that further and specific efforts are needed to ensure that women and girls have access to scientific evidence-based, effective, gender-sensitive and culturally appropriate recovery and related support services,

*Recognizing also* the importance of adequate access of people with drug use disorders to health, care, social and treatment services, and underscoring the need to improve the capacity of Member States, and enhance international cooperation at all levels, to ensure access to recovery and related support services for people with drug use disorders, particularly women, children and youth,

*Noting with appreciation* relevant standards and guidelines developed by the United Nations Office on Drugs and Crime and the World Health Organization in the context of recovery and related support services,<sup>9</sup>

*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,

*Underscoring* that the recovery process from drug use disorders can include cycles of recovery and the recurrence of drug use disorder symptoms, and that after residential and intensive outpatient treatment, patients may benefit from transferring to long-term recovery management and a less intensive level of care, as appropriate, including active connection to recovery communities and other communities, and

<sup>7</sup> See *Official Records of the Economic and Social Council, 2014, Supplement No. 8 (E/2014/28)*, chap. I, sect. C.

<sup>8</sup> *Ibid.*, 2009, *Supplement No. 8 (E/2009/28)*, chap. I, sect. C.

<sup>9</sup> International Standards for the Treatment of Drug Use Disorders and International Standards on Drug Use Prevention.

rapid access back to treatment when needed, and that such measures can support social reintegration,

*Recalling* the Sustainable Development Goals of the 2030 Agenda for Sustainable Development,<sup>10</sup> in which Member States committed to contributing to the achievement of the objectives set out therein, more specifically target 3.5 of the Goals,

*Noting* the importance of advancing the implementation of recovery and related support services, in accordance with domestic laws and taking into account national priorities, and the promotion of mechanisms to comprehensively and effectively support recovery and improve health, well-being and social functioning, including support for people with drug use disorders delivered in consultation with or led by people in recovery to benefit from their experiences, with due consideration of individual and environmental factors, including social, risk and protective factors,

*Mindful* of the need, in accordance with domestic law and taking into account national priorities, to alleviate risk factors that can make people in recovery from drug use disorders more vulnerable to the recurrence of symptoms of drug use disorders, and noting that these risk factors may include difficulties in accessing adequate and appropriate medicines, timely therapeutic and psychotherapeutic support, and social and peer group support, as well as economic hardship and difficulties in securing employment and access to housing,

*Recalling* its resolution 61/11 of 16 March 2018, in which Member States were encouraged, as appropriate, within their national and regional contexts, to promote, among their relevant agencies and social service 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, and to reduce any possible discrimination, exclusion or prejudice those people may encounter,

*Noting with appreciation* the ongoing work and initiatives of relevant international organizations, academia, civil society and community-based organizations to support Member States, as applicable, in the development and implementation of scientific evidence-based programmes to enhance recovery and related support services,

*Concerned* by the fact that, in the absence of effective recovery and related support services, the burden of ongoing care to sustain recovery from drug use disorders falls largely on the family, communities and peer groups, who may lack appropriate training and skills,

*Concerned also* that women and girls carry a disproportionately high burden of care work to support recovery from drug use disorders and in providing economic sustainability for people in recovery from drug use disorders, which could limit their access to education and employment and their ability to exercise other rights on equal terms with men and boys,

1. *Calls upon* Member States to provide, promote, improve, and fund and facilitate, where appropriate, recovery and related support services for individuals who require such services, and as part of a balanced, comprehensive, scientific evidence-based approach to support people with drug use disorders, while also noting that such services should be consistent with their domestic law and national context, geographically and otherwise accessible, voluntary, affordable, gender- and age-sensitive and comprehensive;

2. *Recognizes* that recovery and related support services can be effective as part of a continuum of care and can help to facilitate long-term recovery and successful social reintegration, as well as support people in improving their health, well-being, social connections and social functioning, and alleviate risk factors that

<sup>10</sup> General Assembly resolution 70/1.

can make people in recovery from drug use disorders more vulnerable to the recurrence of drug use disorder symptoms;

3. *Encourages* Member States to take steps to build the capacity of recovery and related support services, including community-based recovery support services and, as appropriate, those in education settings and in workplaces, and to provide appropriate training in this regard;

4. *Also encourages* Member States, consistent with their domestic law and national context, to undertake scientific evidence-based measures aimed at increasing voluntary access for women and girls to recovery and related support services, and their participation and leadership in the development and provision of such services;

5. *Further encourages* Member States to design policies and to adopt measures, in accordance with domestic law and national priorities, aimed at supporting families, communities and peer groups who support and provide economic sustainability for people in recovery from drug use disorders and who may lack appropriate training and skills, in particular women and girls, who carry a disproportionately high burden of care in supporting people in recovery from drug use disorders;

6. *Requests* the United Nations Office on Drugs and Crime, in consultation with Member States, the World Health Organization and other relevant stakeholders, to develop scientific evidence-based guidelines on recovery and related support services;

7. *Also requests* the United Nations Office on Drugs and Crime, subject to the availability of extrabudgetary resources, and upon request by Member States, to provide scientific evidence-based technical assistance and capacity-building with a view to assisting them in establishing, developing and implementing scientific evidence-based recovery and related support services, in accordance with domestic policies and in line with the International Standards for the Treatment of Drug Use Disorders, and in collaboration with other relevant United Nations entities, relevant international and regional organizations, within their respective mandates, and invites Member States to consider the contributions of civil society, experts, academia, representatives of affected communities and other relevant stakeholders;

8. *Encourages* Member States to develop and implement recovery and related support services, in accordance with national legislation, with a view to helping people in the process of recovering from drug use disorders;

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

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