



# Economic and Social Council

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## Commission on Narcotic Drugs

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Item 6 of the provisional agenda\*

**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: draft resolution**

### **Promoting rehabilitation and recovery management programmes as part of the comprehensive treatment of drug use disorders**

*The Commission on Narcotic Drugs,*

*Reaffirming* 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 that everyone has the right to social security, to work, to leisure and to a standard of living adequate for their health and well-being,

*Noting with concern* that violations of and limitations on these rights may be a cause or a consequence of drug use disorders,

*Recalling* the commitment reiterated by countries 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>5</sup> to promote the health and well-being of all individuals, families and communities and of society as a whole, and to facilitate healthy lifestyles through effective, comprehensive and evidence-based demand reduction initiatives at all levels that, in accordance with national legislation and the three international drug control treaties, encompass prevention, early intervention, treatment, care, recovery, rehabilitation and social

\* E/CN.7/2024/1.

<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 S-30/1, annex.



reintegration measures, as well as initiatives and measures aimed at minimizing the adverse social and public health consequences of drug use disorders,

*Recalling also* its resolution 59/5 of 22 March 2016, in which it called upon Member States to develop, as needed, and implement national drug policies and programmes that take into account the specific needs of women and girls, and 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,

*Recognizing* the limited access of women with substance use disorders to treatment services and that further efforts are needed as a result to ensure that women and girls have access to effective treatment and rehabilitation programmes,

*Recalling* the International Standards for the Treatment of Drug Use Disorders, developed by the United Nations Office on Drugs and Crime and the World Health Organization, according to which substance use disorders often take the form of chronic, relapsing disorders and the recovery process for many patients is characterized by cycles of recovery, relapse and multiple treatments, and in which it is recommended that in continuation of evidence-based residential and/or outpatient treatment, patients be given access to long-term, lower-intensity, continuing care services, often also referred to as rehabilitation and recovery management services,

*Recalling also* the 2030 Agenda for Sustainable Development,<sup>6</sup> in which Member States committed to contributing to the achievement of the objectives set out therein, more specifically target 3.5, on strengthening the prevention and treatment of substance abuse, including narcotic drug abuse and harmful use of alcohol,

*Recognizing* the need to advance the implementation of a continuum of care, including rehabilitation and recovery management, also known as aftercare, and the promotion of mechanisms to comprehensively and effectively support recovery processes for people with substance dependence, with due consideration of their life history, gender, culture, social exclusion factors, job opportunities and other external factors such as discrimination and contact with the justice system that may condition the propensity to substance use,

*Recognizing also* that such aftercare programmes should be based on scientific data and evidence, that such evidence for rehabilitation indicates that proactive steps should be taken by service providers to remove or alleviate barriers that make people in recovery more vulnerable to relapse, and that these barriers include difficulties in accessing adequate medication and timely therapeutic support, a lack of social support and of meaningful attachments, economic hardship and difficulties in securing employment, and discrimination and social stigma,

*Concerned* by the fact that in the absence of effective aftercare programmes, the burden of ongoing care to sustain recovery from drug use disorders often falls on the informal sector, including communities, families, partners and peers, and that many times women, in their role as, inter alia, partners, family members, mothers and sisters, are the ones who carry a disproportionately high burden in generating strategies to support recovery from drug use disorders and strategies of accompaniment and in providing economic sustainability for people in recovery, which could limit their own opportunities to participate in the formal job market, to educate themselves, to participate in politics and to exercise other rights on equal terms,

1. *Invites* Member States to promote, improve and facilitate accessible, evidence-based, quality, affordable and comprehensive aftercare services to alleviate those barriers that make people in recovery more vulnerable to relapse and thus more vulnerable when they are discharged into the informal sector;

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<sup>6</sup> General Assembly resolution 70/1.

2. *Encourages* Member States to consider measures aimed at increasing access for women with substance use disorders to scientific evidence-based treatment and recovery services;

3. *Encourages* the United Nations Office on Drugs and Crime and other relevant United Nations entities, within their mandates and subject to the availability of extrabudgetary resources, to provide technical assistance and capacity-building to Member States, upon request, with a view to assisting them in the establishment and development of aftercare services;

4. *Urges* Member States to develop and implement recovery management policies and programmes that guarantee the rights set forth in the Universal Declaration of Human Rights and help people to cope with the negative health and social consequences of drug use disorders;

5. *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;

6. *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 technical guidance on recovery management, in line with the International Standards on the Treatment of Drug Use Disorders, in order to ensure that such services become more available and easily accessible to the population.

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