CND/I/4

SUBJECT OF RESOLUTION: Expanding the Capacity of Communities to Provide Information, Treatment, Health Care and Social

Services to People Living with HIV/AIDS and Other Blood-Borne Diseases in the Context of Drug Abuse and Strengthening Monitoring, Evaluation and

Reporting Systems

SUBMITTED TO: The Commission on Narcotic Drugs

SUBMITTED BY: Japan, Austria, Czech Republic, Finland, Jamaica,

Kazakhstan, Namibia, Netherlands, Nigeria, Peru, Spain, Sudan, Turkey, Uganda, United Kingdom

The Commission on Narcotic Drugs

Reaffirming that drug abuse affects all sections of society and countries at all levels of development, and recognizing that drug demand reduction should address all sections of society, taking into account the social, economic, and political context,

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Considering that according to data from the Joint United Nations Program on HIV/AIDS, 10 percent of all people with HIV/AIDS are injecting drug users and that risk-taking behavior, including the sharing of needles, syringes, and other infected equipment, is a significant route for HIV transmission,

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Recalling its past resolutions, including E/CN.49/4 (2006), E/CN.47/2 (2004), and E/CN.46/2 (2002) on strengthening strategies regarding the prevention of HIV/AIDS in the context of drug abuse as well as previous reports of the International Narcotics Control Board (INCB),

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Respecting the differences in cultures that determine the success of certain programs in different regions,

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Noting the success of needle exchange and/or disposal programs in their efforts to promote safer habits without increasing the prevalence of illegal drugs,

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1. *Recommends* the Economic and Social Council review the progress of HIV/AIDS initiatives dealing with intravenous drug use in specific Member States, and if significant improvement is shown, consider providing economic incentives to these Member States such that:

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(a) these incentives be in the form of a transparent debt forgiveness based on

sustained long-term debt relief in systematic credits, or if this is not applicable, similar economic benefits;

- (b) economic incentive agreements be accepted and agreed upon by the original lender countries in order to respect the sovereignty of both donor Member States and of Member States receiving relief;
- (c) the limiting of cases would be in consideration of existing HIV/AIDS rates through intravenous drug use in the region, nations are encouraged to provide economic incentives to nations that currently have lower rates than similar nations in the area in addition to those that make measurable, relative to the nation's social, cultural, political, and economic circumstances;
- 2. *Suggests* the expansion of needle exchange and/or disposal programs with the approval of national legislatures:
 - (a) These programs would be implemented by the Member States who choose to be represented and opt-in to this initiative. They would analyze previous needle exchange programs and work to implement similar programs in willing countries that address provisions for availability, disposal and disinfection of needles and syringes;
 - (b) They would address funding for new needles, exchange with drug users and disposal of contaminated needles in order to guarantee it comes only from willing Member States;
 - (c) No portion of donations made by countries abstaining from participation in needle exchange programs shall be used for these programs.

Passed by consensus, with 6 abstentions Turkey, Columbia, Bolivia, Pakistan, Cuba, The United Kingdom