

SUBJECT OF RESOLUTION: Public health dimension of the world drug problem

SUBMITTED TO: The World Health Assembly

The World Health Assembly,

1 *Remembering* the rights established by the Universal Declaration of Human Rights,

2 *Reaffirming* Sustainable Development Goals 3, 4, and 10,

3 Deeply concerned by the lack of adequate access to necessary medications globally, espe-4 cially in developing nations,

5 Acknowledging that the Single Convention on Narcotics and the Synthetic Drug Strategy estab-6 lished the proper definitions and intentions of various narcotic drugs,

Aware of the role that active conflicts play in perpetuating drug issues in communities, including
soldiers,

Calls for the collaboration of the World Health Assembly (WHA) and United Office on Drugs
and Crime's (UNODC) Drug Abuse Prevention Centre (DAPC) to highlight the use of alternative pathway
programs, particularly ones aimed at adolescents;

12 2. *Recommends* greater implementation of the Equitable access to essential medicines: a 13 framework for collective action for the access to crucial medications for developing nations such as 14 naloxone, or Narcan, and necessary pain relief as well as ensuring the safety of these medications to 15 prevent their compromise;

3. *Desires* the World Health Organization (WHO) to initiate cooperation with various United Nations Development Programs, such as the United Nations Development Programme (UNDP), United Nations Population Fund (UNFPA) and any willing and able Member States with an underdeveloped healthcare sector to develop and build necessary infrastructure for drug addiction relief while ensuring necessary medication access is preserved, such as pharmacies, hospitals, clinics and rehabilitation centers;

4. *Further desires* WHO to initiate cooperation with the United Nations Education, Science, and Cultural Organization (UNESCO) as well as its University Twinning and Networking program to support the education of drug rehabilitation professionals, counselors, therapists and other staff necessary for the function rehabilitation centers;

5. *Suggests* that all willing and able Member States design and build hygienic facilities within safe areas for the disposal and removal of drug paraphernalia such as used needles, prescription drug bottles, expired medications, tampered and/or compromised medications, tobacco, related nicotine products and any other related waste products;

6. *Invites* any and all willing and able Member States and non-governmental organizations to bolster funding and investment into increased framework for rehabilitation program and implementation of local pharmaceutical facilities;

7. Encourages WHO to cooperate with all willing and able member states to improve the safety, efficiency of, and access to surveys for drug addiction and abuse within regions of conflict, especially within active conflict zones and within combat units;

8. Supports the expansion of counseling support for individuals within regions in which access to professional addiction therapy is limited or nonexistent, such as within conflict zones; 9. *Further encourages* all willing and able Member States to integrate gender-sensitive approaches into substance use treatment programs, including dedicated centers for women and childcare facilities within rehabilitation centers;

10. *Supports* all willing and able Member States to pursue the introduction and announcement of non chemical, emotionally satiating drug alternatives and therapy, and the entertainment of this notion up to a non-bypassable threshold of resistance, so as to address the vocational rehabilitation of assistees;

11. Endorses the General Assembly Second Committee and the Economic and Social Council (ECOSOC) consider and pursue the implementation of Vocational Training availability offered on the basis of universally recognized innate skill, so as to allow the person to further a conventionally non drug-dependent lifestyle.

Passed, Yes: 29 / No: 4 / Abstain: 19