



مَنْظَرُ الصِّحَّةِ الْعَالَمِيَّةِ

قَرَار

RESOLUTION

REGIONAL COMMITTEE FOR THE
EASTERN MEDITERRANEAN

EM/RC52/R.5
September 2005

Fifty-second Session

Agenda item 5 (c)

SUBSTANCE USE AND DEPENDENCE

The Regional Committee,

Having reviewed the technical paper on substance use and dependence;¹

Recalling resolutions WHA 32.40 on the development of the WHO programme on alcohol-related problems, WHA36.12 on alcohol consumption and alcohol-related problems: development of national policies and programmes, WHA42.20 on prevention and control of drug and alcohol abuse, WHA58.26 on public health problems caused by harmful use of alcohol, and EM/RC40/R.9 on abuse of narcotics and psychoactive drugs;

Recalling also The World Health Reports of 2001 and 2002, which indicate that the disease burden and health consequences of substance abuse and dependence are significant;^{2 3}

Alarmed by the new trends and extent of the public health problems associated with substance use and dependence, particularly among young people and women, in Member States of the Region;

Concerned at the rise in injecting drug use in the Region, especially for its serious health consequences that threaten to spread human immunodeficiency virus (HIV) and other blood-borne infections;

Concerned also at the economic loss to society resulting from substance use and dependence;

¹ Document No. EM/RC52/5

² *The world health report 2001. Mental health: new understanding, new hope.* Geneva, World Health Organization, 2001.

³ *The world health report 2002. Reducing risks, promoting healthy life.* Geneva, World Health Organization, 2002

Noting the growing evidence of the effectiveness of strategies and measures to treat and reduce harm among substance users;

Recognizing that a number of countries in the Region are major producers of opium, cannabis and khat;

Stressing the value that all religions, and, with particular reference to this region, Islam attach to saving lives through prohibiting the use and abuse of alcohol and other mind-altering substances;

1. URGES Member States to:

- 1.1 Establish or strengthen a functional multisectoral national coordinating body to address all issues related to substance use and dependence;
- 1.2 Make a wide range of approaches and interventions available to address different aspects of primary prevention, through programmes like life skills education, and different levels of care, rehabilitation and harm reduction, with major reliance on community-based mechanisms and not only hospital-based services;
- 1.3 Establish an information system and undertake focused research to monitor the changing trends in substance use and dependence and alcohol consumption, and foster the building of an evidence base;
- 1.4 Address alcohol consumption as a potentially major public health issue and develop mechanisms for monitoring production, import and smuggling and ways to control consumption and deal with the health hazards of alcohol;
- 1.5 Enact national legislation that considers the substance-dependent as patients not criminals and toughens the punishment of drug dealers;
- 1.6 Stimulate the religious self-deterrent through explaining the religious ruling against alcohol and drug use, and applying religious teachings in control and prevention;

2. REQUESTS the Regional Director to:

- 2.1 Support the efforts of Member States to formulate national policies and strategies and implement sustainable programmes to control substance use and dependence including alcohol;
- 2.2 Develop programmatic linkages with the global programmes dealing with these matters across the United Nations system (UNODC, UNAIDS), with other organizations, and between Member States;
- 2.3 Convene a regional consultation to consider the magnitude of the problem of use of khat in the Region, conduct an evidence-based study of its impact on the individual and the community, and propose suitable solutions to remedy this problem;
- 2.4 Report to the Regional Committee on progress in implementation of this resolution at its meeting in 2007.