Excerpts from UN documents relevant to the UNGASS process

The excerpts below are designed to help you brief the government officials from your country who are involved in preparations for the UNGASS. Please see the list of delegations to the 2015 session of the Commission on Narcotic Drugs to help determine which ministries and officials from your country are likely to be involved in the UNGASS process.

1. **2009 Political Declaration and Plan of Action on International Cooperation towards an Integrated and Balanced Strategy to Counter the World Drug Problem**

This is the current global drug strategy, adopted by UN Member States at a High Level Meeting of the Commission on Narcotic Drugs in 2009. It contains only two paragraphs that reference access to controlled medicines, neither of which acknowledges the current situation.

Paragraph 19

Call for continued cooperation between Member States, the International Narcotics Control Board and the World Health Organization to ensure the adequate availability of narcotic drugs and psychotropic substances under international control, including opiates, for medical and scientific purposes, while concurrently preventing their diversion into illicit channels, pursuant to the international drug control conventions

Paragraph 10(c) of the Action Plan

Continue to comply with the procedures established under the international drug control conventions and relevant resolutions of the Economic and Social Council relating to the submission to the International Narcotics Control Board of estimates of their requirements for narcotic drugs and assessments of requirements for psychotropic substances so as to facilitate the import of the required narcotic drugs and psychotropic substances and to enable the Board, in cooperation with Governments, to maintain a balance between the demand for and the supply of those drugs and substances in order to ensure the relief of pain and suffering and the availability of medication-assisted therapy as part of a comprehensive package of services for the treatment of drug dependence, while bearing in mind, in accordance with national legislation, the World Health Organization Model List of Essential Medicines.

2. **2014 Joint Ministerial Statement**

This document was adopted at a 2014 High Level Review by the Commission on Narcotic Drugs on the implementation of the 2009 Political Declaration and Plan of Action.

Paragraph 14

Call for continued cooperation between Member States, the International Narcotics Control Board and the World Health Organization to ensure the adequate availability of narcotic drugs and psychotropic substances under international control, including opiates, for medical and scientific purposes, while

concurrently preventing their diversion into illicit channels, pursuant to the international drug control conventions, and to provide recommendations on the scheduling of substances

Paragraph 14 of Section on "Demand reduction and related measures"

Note with concern that the availability of internationally controlled drugs for medical and scientific purposes, particularly for the relief of pain and for palliative care, remains low to non-existent in many countries of the world, and highlight the need for Member States, the Commission on Narcotic Drugs and the International Narcotics Control Board, in cooperation with the United Nations Office on Drugs and Crime and the World Health Organization, as appropriate, to address that situation by promoting measures to ensure their availability and accessibility for medical and scientific purposes, in accordance with national legislation, while simultaneously preventing their diversion, abuse and trafficking, in order to realize the aims of the three international drug control conventions;

3. **2014 Annual Report of the International Narcotics Control Board**

The International Narcotics Control Board (INCB) routinely expresses concerns about the limited availability of controlled medicines in much of the world. It has issued a number of special reports on this topic, and is preparing another one for publication in early 2016. The 2014 Annual Report contained the below paragraphs on the problems with availability of controlled medicines.

"11. Ensuring the availability of controlled substances for medical and scientific purposes is a fundamental objective of the drug control system and an obligation of States parties under the international drug control conventions. The 1961 Convention, as amended by the 1972 Protocol, and the 1971 Convention stress that medical use of narcotic drugs and psychotropic substances is indispensable for the relief of pain and suffering and that adequate provision must be made to ensure the availability of internationally controlled substances for medical and scientific purposes. Article 9 of the 1961 Convention, as amended by the 1972 Protocol, expressly stipulates that States parties are responsible for ensuring the availability of narcotic drugs for licit purposes, and gives the Board the mandate to monitor the availability of controlled substances for legitimate purposes.

12. Acting under its mandate to assess licit consumption of controlled substances in Member States, the Board was among the first to signal that major discrepancies existed among various regions in terms of the availability of narcotic drugs, and that inadequate access to controlled substances affected a great number of countries. For the past two decades, the Board has paid particular attention to this concern in its relations with Governments and other relevant stakeholders, and has recommended measures to address the situation. Data on the availability of opioid analgesics indicate that, despite progress made in some regions, i.e. Latin America and West, East and South-East Asia, approximately 5.5 billion people, or three quarters of the world's population, live in countries with low levels of, or non-existent, access to medicines containing narcotic drugs and have inadequate access to treatment for moderate to severe pain, while 92 per cent of the world's morphine is consumed by 17 per cent of the world's population, primarily in North America, Oceania and Western Europe. The Board also indicated on several occasions that comparable discrepancies existed in relation to access to appropriate amounts of psychotropic substances for licit purposes.

13. The analysis of the data provided by Member States shows that the amount of opiate raw material available for the production of opioid analgesics for pain relief is more than sufficient to satisfy the requirements and consumption reported by Governments, and that global stocks are increasing. The low demand for opioid analgesics for pain relief in many countries is obviously not the result of a shortage of licitly produced raw materials. As the Board has repeatedly stressed, the situation could be substantially improved through corrective action by States parties to address the regulatory, attitudinal, knowledge-related, economic and procurement-related problems identified as the main causes of inadequate availability of opioids. The Board encourages States to cooperate with the World Health Organization (WHO) and other relevant stakeholders on this matter, and reiterates its openness and readiness to continue assisting countries in achieving better results in this area. To that end and as a contribution to the special session of the General Assembly on the world drug problem to be held in 2016, the Board will issue an updated version of its 2010 special report entitled Availability of Internationally Controlled Drugs: Ensuring Adequate Access for Medical and Scientific Purposes, which will provide updated data on and analysis of the consumption and availability of internationally controlled drugs for medical and scientific use."

4. **WHO Access to Controlled Medicines Briefing Note**

The WHO Access to Controlled Medicines Programme focuses on ensuring the adequate availability and accessibility of all controlled medicines for patients. It issued a briefing note in 2012 containing the following facts:

"Access to many medicines controlled under international drug control treaties is lacking around the world, with the exception of a few industrialized countries. Even in some highly industrialized countries access is limited. The realization of the Millennium Development Goal 8e:"Provide access to affordable essential drugs in developing countries", is likely to be further away for opioid analgesics than for any other class of medicines.

The World Health Organization (WHO) estimates that 5.5 billion people (83% of the world's population) live in countries with low to non-existent access to controlled medicines and have inadequate access to treatment for moderate to severe pain.

Lack of access affects all controlled medicines on the WHO Model List of Essential Medicines and the WHO Model List of Essential Medicines for Children. Because of their status as essential medicines, their availability for medical treatment is a human right, as defined in the International Covenant on Economic, Social and Cultural Rights (article 12, the Right to Health)."

5. World Health Assembly Palliative Care Resolution

In 2014, UN Member States unanimously adopted a resolution on palliative care entitled: 'Strengthening of palliative care as a component of comprehensive care throughout the life course'. The resolution makes a number of recommendations regarding the availability of controlled medicines. For example:

“Noting that the availability and appropriate use of internationally controlled medicines for medical and scientific purposes, particularly for the relief of pain and suffering, remains insufficient in many countries, and highlighting the need for Member States, with the support of the WHO Secretariat, the United Nations Office on Drugs and Crime and the International Narcotics Control Board, to ensure that efforts to prevent the diversion of narcotic drugs and psychotropic substances under international control pursuant to the United Nations international drug control conventions do not result in inappropriate regulatory barriers to medical access to such medicines;

1. URGES Member States:

(6) to review and, where appropriate, revise national and local legislation and policies for controlled medicines, with reference to WHO policy guidance, on improving access to and rational use of pain management medicines, in line with the United Nations international drug control conventions;

2. REQUESTS the Director-General:

(4) to continue, through WHO’s Access to Controlled Medicines Programme, to support Member States in reviewing and improving national legislation and policies with the objective of ensuring balance between the prevention of misuse, diversion and trafficking of controlled substances and appropriate access to controlled medicines, in line with the United Nations international drug control conventions;

(6) to work with the International Narcotics Control Board, the United Nations Office on Drugs and Crime, health ministries and other relevant authorities in order to promote the availability and balanced control of controlled medicines for pain and symptom management.”

Conclusion

We hope that this will help you to design your briefing notes and advocacy strategy to encourage your governments to prioritise the development of an action plan by the UNGASS to address the limited availability of controlled medicines in much of the world.