Statement to the Commission on Narcotic Drugs

Intersessional Meeting — Vienna — October 27th 2016 Operational recommendations of the UNGASS 2016 outcome document

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After the special session of the United Nations General Assembly (UNGASS) on the world drug problem held in April 2016 in New-York and its preparatory process started in Vienna since 2014, where the public health dimension of the world drugs issue has been tightened, the public health approach that policy makers shall follow at the national level have been widely debated all over the globe. This declaration aims at enlightening some operational recommendations made in the UNGASS outcome document (<u>UN/A/S-30/L.1</u>) that calls State Parties to the three international drug control convention and WHO Member States to rethink their approach on the framework of scheduling substances under international treaties, as a key tool to ground policies on health and evidences.

In May, the 69th World Health Assembly held a special discussion around its agenda item 12.6 titled « Public health dimension of the world drug problem including in the context of the UNGASS on the World Drug Problem held in 2016 ». A report (<u>WHO/A69/12</u>) made by the Secretariat of the World Health Organization, as well as the very UNGASS outcome document, were the two main basis of the discussion held in May during the Assembly.

Through that report, the WHO Secretariat started drafting a first operational approach of the 2016 UNGASS outcome document, and in particular « highlighted the importance of **moving towards a more balanced and comprehensive approach in global drug policies that highlights public health and development outcomes**, consistent with the **original purpose of the three international drug control conventions to promote the health and welfare** of humankind ». The Secretariat also recalled that « the enjoyment of the highest attainable standard of health is a fundamental right of every human being as stated in the WHO Constitution and that WHO is the directing and coordinating authority for health within the United Nations system », noting that « the primary concern of the international drug control conventions is to protect the health and welfare of humankind » and that « WHO is one of their four treaty bodies », rightly and finally placing itself as a **key and central agency within the international drug control system** that, being based on health, shall be articulated around health agencies.

This approach is not carried only by common sense and by the WHO Secretariat: a **draft resolution submitted by 14 countries during the 69th World Health Assembly** (<u>WHO/A69/A/CONF./4</u>), requested the WHO Director General « to develop, within the existing mandate of WHO, a comprehensive strategy and action plan to strengthen action on the public health dimension of the world drug problem, including consultation with Member States, as well as other competent United Nations organizations ». Although the UNGASS outcome document expressly reaffirms the treaty-mandated role of the WHO in its <u>16th introductory paragraph</u>, that resolution was surprisingly not carried to its term, not because it suffered from a lack of support from Member states, but because of a lack of time during the World Health Assembly.

Beyond the WHO's will to lock the interpretation of the UNGASS outcome in a health-oriented perspective, the outcome document in itself, when read under the light of many of its wordings, proposes an increased focus on health, with several operational instruments aimed at grounding national approaches of drug policies on scientific-evidences. This is

particularly salient in the following paragraphs of the UNGASS outcome document :

- <u>6th paragraph of the introduction</u> (p. 2);
- <u>19th paragraph of the introduction</u> (p. 4);
- introductory paragraph of the item 1 operational recommendations on demand reduction and related measures (pp. 4-5);
- paragraph 1 (d) of the same item 1 (p. 5);
- <u>2nd introductory paragraph of the item 5 operational recommendations</u> on cross-cutting issues in addressing and countering the world drug problem: evolving reality, trends and existing circumstances, emerging and persistent challenges and threats (p. 17);
- paragraph (y) of the same item 5 operational recommendations (p. 22).

Beyond those recommendations that set the framework of a renewed, balanced and scientific evidence-based approach of the international drug control regime, the outcome document underlines certain aspects of the treaty-mandated role of WHO, in particular through a call for « informed and coordinated scheduling decisions » in its paragraph (g) of item 2 operational recommendations, and further recalls support for the « scientific evidence-based review and scheduling of the most prevalent, persistent and harmful substances » in the 2nd introductory paragraph of the item 5 Operational recommendations on cross-cutting issues (p. 17), to better address the emerging new psychoactive substances.

Following the WHO analysis of the UNGASS 2016 outcome document, it is to be noted with satisfaction though that as is, the document ensures a comprehensive commitment to support the WHO to undertake the processes of assessment, and if needed re-assessment, to ensure a decent, sustainable and trustworthy scheduling of narcotic drugs and psychoactive substances for the XXIst century.

Finally, a deep concern is expressed in the UNGASS outcome document regarding the « **low or non-existent** » availability of internationally controlled drugs for medical purposes in the <u>5th paragraph</u> of the introduction (p.2); as well, a « strong commitment to improving access » to those substances introductory paragraph of the operational recommendations of item <u>2</u> (p.8) is made. In this regard, a renewed and more accurate scheduling of substances also appears to be an essential issue towards a comprehensive availability of scheduled substances for medical purposes.

Recognizing that many of the evidentiary processes under which narcotic drugs or psychoactive substances (including some of the most prevalent) have been scheduled are obsolete;

and further recognizing that the financial difficulties of the WHO have compromised the functioning of its Expert Committee on Drug Dependence (to the point of having only one meeting between 2007 and 2014 where four should have taken place, while in the meantime the UNODC noted a spectacular increase in the apparition of new molecules);

we hereby invite all country delegations to ensure the accurate mobilisation of resources, including to consider assuming extra-budgetary implications, in order to permit to the WHO and its Expert Committee on Drug Dependence to assume fully its important and needed work of ensuring an accurate and updated assessment of substances, reflecting both the lege artis medicine and advanced research and the ground realities, undertaking the evaluation and review procedure when appropriate;

and suggest the board of the Commission on Narcotic Drugs as well as the post-UNGASS facilitator to undertake actions aiming at visualizing this issue during the upcoming sessions of the Commission.