INTERNATIONAL NARCOTICS CONTROL BOARD Geneva

First Report of the International Narcotics Control Board

November 1968



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ABBREVIATIONS

The following abbreviations are used except where the context otherwise requires:

Abbreviation	Full title
Board	International Narcotics Control Board.
1912 Convention	International Opium Convention signed at The Hague on 23 January 1912.
1925 Agreement	Agreement concerning the Manufacture of, Internal Trade in and Use of Prepared Opium, signed at Geneva on 11 February 1925, as amended by the Protocol signed at Lake Success, New York, on 11 December 1946.
1925 Convention	International Opium Convention signed at Geneva on 19 February 1925, as amended by the Protocol signed at Lake Success, New York, on 11 December 1946.
1931 Convention	Convention for limiting the manufacture and regulating the distribution of narcotic drugs, signed at Geneva on 13 July 1931, as amended by the Protocol signed at Lake Success, New York, on 11 December 1946.
1931 Agreement	Agreement for the Control of Opium Smoking in the Far Fast, signed at Bangkok on 27 November 1931, as amended by the Protocol signed at Lake Success, New York, on 11 December 1946.
1936 Convention	Convention for the suppression of the illicit traffic in dangerous drugs, signed at Geneva on 26 June 1936, as amended by the Protocol signed at Lake Success, New York, on 11 December 1946.
1946 Protocol	Protocol amending the Agreements, Conventions and Protocols on Nar- cotic Drugs concluded at The Hague on 23 January 1912, at Geneva on 11 February 1925 and 19 February 1925 and 13 July 1931, at Bangkok on 27 November 1931 and at Geneva on 26 June 1936, signed at Lake Success, New York, on 11 December 1946.
1948 Protocol	Protocol signed at Paris on 19 November 1948 bringing under international control drugs outside the scope of the Convention of 13 July 1931 for limiting the manufacture and regulating the distribution of narcotic drugs, as amended by the Protocol signed at Lake Success, New York, on 11 December 1946.
1953 Protocol	Protocol for limiting and regulating the cultivation of the poppy plant, the production of, international and wholesale trade in, and use of opium, signed at New York on 23 June 1953.
1961 Convention	Single Convention on Narcotic Drugs, signed at New York on 30 March 1961.

FOREWORD

In pursuance of the international treaties on narcotic drugs, the Board submits the following report to the Economic and Social Council and to the Contracting Parties. This report is the first to be drawn up by the Board since it entered upon its functions on 2 March 1968.

In accordance with Article 15 of the 1961 Convention the Board also submits the following three additional reports:

1. A Statement of, and Commentary upon, the Estimated World Requirements of Narcotic Drugs and Estimates of World Production of Opium in 1969 (E/INCB/2) to be followed by four quarterly addenda of Supplementary Estimates.

2. Synoptic tables of narcotic drugs for the year 1967 and maximum permissible opium stocks, accompanied by an analysis of the trends in the national and international narcotic drug situation in 1967 (E/INCB/3).

3. Synoptic tables comparing the estimated requirements of narcotic drugs in 1967 with actual requirements as reflected in the narcotic drug statistics for that year (E/INCB/4).

Membership of the Board

Article 10 of the 1961 Convention provides that the members of the Board shall be appointed by the Economic and Social Council for a term of three years. At its 42nd session (May-June 1967), the Council appointed the following members who have exercised their term of office since 2 March 1968:

Mr. M. ASLAM

Managing Director of a newspaper group; formerly Secretary, Ministry of Commerce and Member Central Board of Revenue, Government of Pakistan; Leader of the Pakistan delegation to the Conference of the United Nations for the adoption of a Single Convention on Narcotic Drugs, 1961.

Professor Michel A. ATTISSO

Professor at the Joint Faculty of Medicine and Pharmacy of Dakar (Senegal); Professor by special appointment at the Faculty of Pharmacy of Montpellier (France); Head Pharmacist of the University Hospital Centre of Montpellier (on secondment); Expert in pharmacology and toxicology for proprietary pharmaceutical preparations (French Ministry of Social Affairs); Expert of the World Health Organization on the advisory panel on the International Pharmacopoeia and Pharmaceutical Preparations; Chairman of the Scientific Council of the Organization of African Unity.

Professor Marcel GRANIER-DOYEUX,

Member of the World Health Organization Expert Advisory Panel on Drug Dependence; Member of the World Health Organization Expert Committee on Dependence-Producing Drugs; former President, National Academy of Medicine of Venezuela; former Vice-President of the National Academy of Physical, Mathematical and Natural Sciences of Venezuela; Professor and Chairman, Department of Pharmacology and Toxicology, Faculty of Medicine,

Central University of Venezuela; Fellow (Foreign) of the Academy of Pharmacy (Paris France); Fellow (Foreign) of the Royal National Academy of Medicine (Spain); Fellow (Foreign) of the Brazilian Academy of Pharmacy; Fellow (Foreign) of the Argentine Scientific Society; Fellow (Foreign) of the Brazilian Society of Chemistry; Fellow of the Pan American Academy for the History of Medicine; former President of the Venezuelan Society for the History of Medicine; Fellow (Foreign) of the Brazilian Institute for the History of Medicine; Fellow (Foreign) of the Academy of Medicine; Fellow (Foreign) of the Brazilian Institute for the History of Medicine; Fellow (Foreign) of the Academy of Medicine; Fellow (Foreign) of the Brazilian Institute for the History of Medicine; Fellow (Foreign) of the Academy of Medicine; Fellow (Foreign) of the Brazilian Institute for the History of Medicine; Fellow (Foreign) of the Academy of Medicine; Fellow (Foreign) and Psychiatry; Fellow of the Venezuelan Society for Allergology; Associate Fellow of the Venezuelan Society of Neurology and Psychiatry; Fellow of the Pan American Association of Allergology; Fellow of the Pan American Medical Association; Honorary Member of the College of Pharmacy (Caracas, D.F., Venezuela); Fellow of the College of Physicians (Caracas, D.F., Venezuela); former Chief, Section on Pharmacology of the National Institute of Health (Venezuela); former Professor of Pharmacology of the Central University of Venezuela and of the Faculty of Pharmacy of the Catholic University "Andrés Bello"; *Comendador de la Orden del Libertador "Simon Bolivar"* (Venezuela); *Oficial de la Orden del Mérito Carlos J. Finlay* (Cuba).

Sir Harry Greenfield, C.S.I., C.I.E.

Bank and company director in the United Kingdom. Formerly Chairman, Central Board of Revenue, Government of India, Delhi. Representative of India on the United Nations Commission on Narcotic Drugs in 1946. Vice-President of the Permanent Central Narcotics Board from 1948 to 1952 and its President from 1953 to 1968; Chairman of the Institute for the Study of Drug Dependence, United Kingdom.

Dr. Amin Ismail Chehab

Former Director-General of the Pharmaceutical Department and rapporteur of the Committee on Registration of Pharmaceutical Preparations, Ministry of Public Health, Cairo; former member of the committees on the Egyptian Pharmacopoeia and Egyptian Hospital Pharmacopoeia; former member of the Supreme Board of Pharmaceuticals; former lecturer and external examiner at the Faculty of Pharmacy, Cairo University; representative of the United Arab Republic on the United Nations Commission on Narcotic Drugs in 1946, 1949, 1954 and from 1956 to 1962, rapporteur in 1956 and vice-president in 1960 and 1961 of that Commission; representative of the United Arab Republic at the United Nations Conference for the Adoption of a Single Convention on Narcotic Drugs, 1961, and vice-chairman of the Technical Committee of that Conference. Member of the Permanent Central Narcotics Board from 1963 to 1968; member of the Drug Supervisory Body in 1967 and 1968.

Professor Sükrü KAYMAKÇALAN

Chairman of the Department of Pharmacology, Medical Faculty of Ankara University; Head of Section of Pharmacology, Hacettepe University, Ankara; President of the Turkish Pharmacological Society; member of the Executive Committee of Medical Research Group, the Scientific and Technical Research Council of Turkey; member of the Turkish Academy of Medicine; member of the Turkish Pharmacopoeia Commission; member of the International Society for Biochemical Pharmacology; member of the New York Academy of Science and member of the Technical Committee during the Conference of the United Nations for the Adoption of a Single Convention on Narcotic Drugs, 1961.

Dr. Tatsuo KARIYONE

Professor Emeritus of the University of Kyoto; honorary Doctor of the University of Paris; member of the Panel Committee of the International Pharmacopoeia of the World Health Organization; former Professor of Kyoto University (Pharmacognosy and Phytochemistry); former Director of the National Institute of Hygienic Sciences; former President of National Board of Pharmacy; former Chairman of the Board of Japanese Pharmacopoeia; former Chairman of the Board of National Examination for the license of Pharmacists; former President of the Society of Pharmaceutical Sciences of Japan; former President of the Pharmacists' Association of Japan; former President of Food-Hygienic Society of Japan; honorary member of the American Society of Pharmacognosy.

Mr. E. S. Krishnamoorthy

Formerly Chairman, Central Board of Revenue, Government of India, Delhi. Representative of India on the United Nations Commission on Narcotic Drugs, 1952-1953-1954 and 1960, and leader of the Indian delegation to the United Nations Opium Conference of 1953. Former Indian Trade Commissioner with Japan. Former Indian Consul-General, Shanghai. Member of the Permanent Central Narcotics Board from 1960 to 1968; Vice-President of the Drug Supervisory Body from 1963 to 1968.

Professor Paul REUTER

Professor in the Faculty of Law and Economics, Paris. Member of the Permanent Court of Arbitration, The Hague. Member of the United Nations International Law Commission. Member of the Permanent Central Narcotics Board from 1948 to 1968 and its Vice-President from 1953 to 1968.

Mr. Leon STEINIG

Former Senior Adviser, Department of Technical Assistance, International Atomic Energy Agency. Former Senior Member, Dangerous Drugs Section, League of Nations; in charge of the Branch Office of the Supervisory Body in Washington, D.C. Former Director, Narcotics Division, former Acting Principal Director and former Acting Assistant Secretary-General in charge of the Department of Social Affairs, United Nations Secretariat. Member of the Permanent Central Narcotics Board from 1963 to 1968.

Dr. Imre Vertes

Former Director of the Budapest Pharmaceutical Centre; former member of the Pharmaceutical Commission of the Hungarian Academy of Sciences; representative of the People's Republic of Hungary at the United Nations Commission on Narcotic Drugs from 1958 to 1964 and Vice-President of that Commission in 1962, 1963 and 1964; member of the Hungarian delegation at the Conference of the United Nations for the Adoption of a Single Convention on Narcotic Drugs, 1961; Vice-President of the Hungarian Pharmaceutical Society from 1959 to 1968 and Honorary Member of the Bureau of this Society.

At its first session, in March 1968, the Board elected Sir Harry Greenfield President, Professor Granier-Doyeux and Mr. Aslam, Vice-Presidents and Mr. Steinig, Rapporteur, for the period until the first session of the Board in 1969.

Sessions in 1968

The board held its first session from 4 to 8 March, its second session from 27 May to 7 June and its third session from 21 October to 8 November 1968. The Secretary-General was represented at these sessions by Dr. V. Kušević, Director of the Division of Narcotic Drugs of the United Nations Secretariat, by Mr. S. Sotiroff and Dr. O. Braenden, officers of that Division. The World Health Organization was represented at these sessions by Professor H. Halbach, Director, Division of Pharmacology and Toxicology, by Dr. D. C. Cameron, Chief, Drug Dependence Unit, and by Dr. T. Chrusciel, Medical Officer, Drug Dependence Unit. Dr. Cameron and Dr. Chrusciel attended the sessions of May-June and October-November.

Representation at International Conferences

The Board was represented by the President and the Secretary at the 44th session of the Economic and Social Council (New York, May 1968); by the Secretary and the Deputy-Secretary at the 21st World Health Assembly (Geneva, May 1968) and at the sixteenth session of the Expert Committee on Dependence-Producing Drugs (Geneva, October 1968); and by the Deputy-Secretary at the United Nations Interregional Seminar on Narcotics Control for Law Enforcement Officers in the Near and Middle East (Beirut, September-October 1968).

Nomenclature of countries and territories

In referring to political entities the Board is guided by the rules governing the practice of the United Nations and the nomenclature thus employed does not imply the expression of any opinion whatsoever concerning the legal status of any country or territory or of its authorities, or concerning the delimitation of its frontiers.

THE CONSOLIDATION OF THE INTERNATIONAL SYSTEM OF NARCOTICS CONTROL

1. The final stage of bringing into operation the Single Convention on Narcotic Drugs of 1961 was formally reached on 2 March 1968, on which date the Permanent Central Narcotics Board and the Drug Supervisory Body were superseded and the International Narcotics Control Board, established under the 1961 Convention, entered upon its duties.¹ The legal structure of the international system of narcotics control has thus been consolidated.

2. This was the culmination of a process that began with the Shanghai Opium Commission in 1909. During the intervening half-century an impressive body of international treaty law has been gradually developed: since 1912 nine international instruments ² have been drawn up, adopted, put to the test of implementation, and successively modified and completed in the light of experience; and all nine have now been subsumed in the 1961 Convention.

3. When this Convention entered into force in 1964 the Governments of the contracting parties for the first time extended the whole apparatus of international control to all narcotic substances. With its enactment, the production of all narcotic raw materials from which narcotic drugs are manufactured, the manufacture of all narcotic drugs, the trade in all these substances, their possession and their use have been brought under international supervision and the quantities are limited exclusively to medical and scientific needs.

4. By thus voluntarily limiting their freedom of action in this sphere and accepting legal obligations recorded in an international treaty, Governments have undertaken to submit to international regulation transactions in narcotic substances within their respective jurisdictions, whether such substances are already known or may hereafter be certified as falling within the definitions of the 1961 Convention; and they have formally recognized that national interests are identical with the international interest in this domain and entail an obligation to join in protecting these interests by effective universal application of the treaty. To this end, an international control organ, the International Narcotics Control Board, endowed with somewhat extended powers which partake of a judicial character, has been set up to ensure that all Governments respect this identity of interests and combine together in action under the treaty. In accepting these mutual obligations Governments have re-emphasized a principle already embodied in earlier international treaties on narcotics, ³ namely the principle of collective responsibility for any corrective measure which the Board might have to take on their behalf under the treaty in order to achieve or maintain or restore the community of interests that might be temporarily disturbed by a disregard or outright violation of the treaty provisions by a Party or non-Party.⁴

5. This basic self-limiting attitude of Governments, already illustrated in the 1925 Convention, continues to offer the only practical possibility of establishing an effective universal system of defence against the abuse of dangerous drugs and its consequences. It also explains the care with which Governments have safeguarded in Article 9 of the 1961 Convention the independence of the Board and of each of its members in the exercise of their function and have defined their qualifications and their impartiality. As a corollary to the limitation of their individual freedom of action the Contracting Parties have conferred rather wide powers on the Board; and as a consequence they insist on the Board's impartiality and the independence of its members from any external influence.

* *

6. Since assuming office in March 1968 the members of the Board have directed themselves to the following immediate obligations:

¹ The 1961 Convention came into force on 13 December 1964. Under Article 45 of the Convention the Economic and Social Council decided that the Board should enter upon its duties on 2 March 1968. In the meantime, that is to say between 13 December 1964 and 1 March 1968, the functions of the Board were provisionally assumed and carried out by the Permanent Central Narcotics Board and the Drug Supervisory Body.

² See paragraph 13, note 7, of this report.

⁸ In the 1925 and 1931 Conventions and in the 1953 Protocol.

⁴ Article 14 of the 1961 Convention stipulates e.g. that if the Board "has reason to believe that the aims of this Convention are being seriously endangered by reason of the failure of any country or territory to carry out the provisions of this Convention" it is empowered to take whichever of the measures enumerated in that article may be appropriate.

to ensure the continuity of the international system of narcotics control;

to familiarize themselves with the letter and spirit of their responsibilities under the 1961 Convention and earlier narcotics treaties, with respect both to Parties and non-Parties; to scrutinize all available information and data on the implementation by individual Governments of the narcotics treaties and on the working of the international control system as a whole, and to assess to what degree it is at present effective.

CONTINUITY OF THE INTERNATIONAL SYSTEM OF NARCOTICS CONTROL

7. It is essential to the effectiveness of the system that there should be unbroken continuity of application at both the national and the international levels. This requires continuous co-operation between the national administrations and the Board.

THE INTERNATIONAL LEVEL

8. The Board was glad to find that during the transitional period December 1964-March 1968 the Permanent Central Narcotics Board and the Drug Supervisory Body, assisted by their secretariat, had drawn up a detailed plan and taken all preparatory measures to bring about the full implementation of the 1961 Convention, including a formal agreement with the Secretary-General of the United Nations, endorsed by the Economic and Social Council⁵ providing administrative arrangements adequate to safeguard the Board's independence and ensure necessary resources for carrying out its duties. Thanks to these preparations the transition to the régime of the 1961 Convention has been smoothly, amost imperceptibly accomplished, as has also the transmission to the Board of the functions exercised till 1 March 1968 by the Permanent Central Narcotics Board and Drug Supervisory Body. As with any body required to act in a judicial capacity the proper fulfilment of the Board's responsibilities rests, and has always rested, on an accumulation of wide knowledge and experience.

THE NATIONAL LEVEL

9. It was to be expected that national administrations would encounter difficulties in adapting their working methods to the new régime of more extensive reporting under the 1961 Convention, particularly with regard to estimates and statistical returns covering all narcotic substances including narcotic raw materials.

10. As soon as the Convention came into effect in 1964 the Permanent Central Narcotics Board began to implement the new treaty by stages and drew up new sets of statistical and estimates forms, simplifying them wherever possible; and the Governments began to supply data in these forms for the year 1966. Examination of statistical returns for 1966 and 1967 and of estimates for the years 1966 to 1969 has in a number of instances revealed imperfections in the supply of information. Although the returns for 1967 and the estimates for 1969 show improvement, the remaining weaknesses are still detrimental to the proper functioning of the international control system and the Board has invited the attention of Governments to them in paragraphs 32-46 of the present report.

11. The Permanent Central Narcotic Board used all means at its disposal to mitigate such defects and the new Board will continue the procedure followed by its predecessor; it looks to all Governments to comply with their obligation to submit reports and to make them as complete and accurate as possible. Only thus will it be possible to bring the system of national and international control up to the level postulated in the treaties, a level which must be reached if the goals of the 1961 Convention are to be realized in the interest of all Governments separately and collectively.

NATURE AND SCOPE OF THE NEW BOARD'S DUTIES

12. The Board examined these duties in the light of the specific provisions of the 1961 Convention which:

outlaws the production, trade and use for nonmedical purposes of all narcotic substances, including opium, coca leaves and cannabis, and requires those States which temporarily authorize the nonmedical use of the last-mentioned three substances to eliminate this practice within prescribed periods of time;

limits possession of all narcotic substances to medical and scientific purposes and to persons authorized to possess such substances;

makes obligatory for all narcotic substances the limitation based on estimates introduced by the 1931 Convention for manufactured drugs only;

⁵ Resolution 1196 (XLII) of the Economic and Social Council.

by incorporating the basic provisions of the 1953 Protocol, provides for the international control of all opium transactions through what are, in fact, national opium monopolies; allows production only by licensed farmers in areas and on plots of land designated by the national monopoly, the farmers being required to deliver their entire opium crop to the national monopoly; confers upon these monopolies the exclusive right of purchasing from farmers their opium crop, conducting export, import and wholesale trade, and maintaining stocks of opium;⁶ and extends these provisions also to coca leaf and cannabis;

requires licences for manufacture of and trade in narcotic drugs;

extends to poppy straw the system of import certificates and export authorizations introduced by the 1925 Convention;

completes the international system of statistical control by extending it over the entire range of transactions concerning all drugs covered by the Convention;

stipulates that the Parties to the 1961 Convention shall permit the unrestricted distribution of the Board's reports.

13. Within the legal framework of these provisions of the 1961 Convention and taking into account the functions it might have to undertake under the treaties on narcotics previously concluded and enumerated in Article 44 of the 1961 Convention,⁷ the Board's main duties are to:

⁶ Opium stocks could be also maintained by authorized manufacturers of opium alkaloids; however Parties may extend the right to hold stocks of medicinal opium and of opium preparations by other authorized persons or institutions, e.g. pharmacies and hospitals.

- (a) International Opium Convention, signed at The Hague on 23 January 1912;
 - (b) Agreement concerning the Manufacture of, Internal Trade in and Use of Prepared Opium, signed at Geneva on 11 February 1925;
 - (c) International Opium Convention, signed at Geneva on 19 February 1925;
 - (d) Convention for limiting the Manufacture and regulating the Distribution of Narcotic Drugs, signed at Geneva on 13 July 1931;
 - (e) Agreement for the Control of Opium Smoking in the Far East, signed at Bangkok on 27 November 1931;

watch continuously the course of the international trade in narcotics with the view to preventing any country from becoming a centre of illicit traffic;

investigate matters relating to narcotics which may be brought to its attention in accordance with the provisions of the relevant treaties;

seek explanations in respect of apparent breaches of the treaties;

bring to the notice of the Economic and Social Council any proven breaches of the treaties;

call upon Governments to adopt such remedial measures as shall seem to be necessary for the execution of the provisions of the relevant treaties;

recommend, in the event of important breaches of the relevant treaties, an embargo on the import of drugs, export of drugs, or both, from or to the country or territory concerned, either for a designated period or until the Board shall be satisfied as to the situation in that country or territory;

by direct notification stop further exports to any country if the quantity exported to that country exceeds its limits, based on estimates, which are determined in accordance with the Treaties;

undertake with the consent of the Government concerned local enquiries in the event of a serious opium situation arising in any country;

arrange for the publication of its reports, in other words to address itself to the public opinion of all countries.

- (f) Protocol signed at Lake Success on 11 December 1946, amending the Agreements, Conventions and Protocols on Narcotic Drugs concluded at The Hague on 23 January 1912, at Geneva on 11 February 1925 and 19 February 1925 and 13 July 1931, at Bangkok on 27 November 1931 and at Geneva on 26 June 1936;
- (g) The Conventions and Agreements referred to in subparagraphs (a) to (e) as amended by the Protocol of 1946 referred to in sub-paragraph (f);
- (h) Protocol signed at Paris on 19 November 1948 bringing under International Control Drugs outside the Scope of the Convention of 13 July 1931 for limiting the Manufacture and regulating the Distribution of Narcotic Drugs, as amended by the Protocol signed at Lake Success on 11 December 1946;
- (i) Protocol for limiting and regulating the Cultivation of the Poppy Plant, the Production of, International and Wholesale Trade in, and Use of Opium, signed at New York on 23 June 1953.

REVIEW AND ASSESSMENT OF INFORMATION ON THE WORKING OF THE INTERNATIONAL SYSTEM OF NARCOTICS CONTROL

THE LEGAL BASIS

14. The 1961 Convention provides for a comprehensive control on both levels: national and international.

15. Final Acceptance of the Convention by 64 countries ⁸ is a positive development. Governments that have not yet ratified or acceded to the Convention are urged to become Parties thereto in order to complete, as soon as possible, the legal and administrative consolidation of the control system.

CONDITIONS OF SUCCESS

16. Universality of the Convention's formal acceptance by Governments is the condition of its full success. Its value will be judged by the results of implementation.

17. In its Final Report (E/OB/23-E/DSB/25 paragraphs 12-22), the Permanent Central Narcotics Board described the administrative difficulties arising from the change in the date of the meetings of the Commission on Narcotic Drugs and deprecated any weakening of the narcotics control régime at the present time when irresponsible recourse to dangerous dependence-producing substances is rapidly on the increase. The Board supports the view expressed by the Permanent Central Narcotic Board that the Commission on Narcotic Drugs should continue to meet every year, and it hopes that the Council will give further consideration to this matter.

18. The Governments rightly expect the Board to do its duty; and the Board will do its utmost to contribute to fulfilment of the aims of the Convention. But the success of its work, as of the Convention itself, will be determined on the national level. It is only by a combined effort on the part of all national administrations that the problem of drug abuse can be appreciably reduced.

NARCOTIC DRUGS SITUATION

Manufactured drugs

19. While it is true that the situation in the 1920s was worse than now because considerable quantities of morphine, heroin and cocaine then flowed into

illicit channels from authorized factories, and although the application of the 1925 and 1931 Conventions has reduced this flow almost to vanishing point,⁹ it is undeniable that the narcotics problem today is still grave; and the most conservative estimate of narcotic drug abuse in some countries is alarming. The average lower age group of addicts continues to fall, and in some countries abuse has been found among children of 14 years.

20. A side-effect of the successes of the 1925 and 1931 Conventions was that the pattern of drug abuses and hence of the illicit traffic underwent a significant change. Being unable from the 1930s onwards to obtain their supplies from diversions from the legal manufacture and trade, traffickers were obliged to turn to clandestine manufacturers whose numbers have tended to increase; and more recently clandestine manufacture has extended to regions where the production of narcotic raw materials (opium and coca leaves) is not controlled or is insufficiently controlled.

21. Further progress was made by the coming into force in 1963 and 1964 respectively of the 1953 Protocol and the 1961 Convention which for the first time brought under treaty control the agricultural narcotic raw materials, opium, coca leaves and cannabis, thus closing a major gap in the previous treaties. Even so, traffickers still have access to ample supplies of opium and coca leaves for the manufacture of morphine, heroin and cocaine, partly through leakages from the licit cultivation of these products, but mostly from extensive uncontrolled or illicit production in certain areas.

Opium

22. Whereas in the early thirties, as recalled by the Permanent Central Narcotics Board,¹⁰ a total quantity of some 4,000 tons of opium was annually available for illicit purposes, the quantity available today is estimated to be in the region of 1,200 tons; yet even this quantity exceeds the total annual licit production. This estimate is conservative and there is reason to

⁸ For the sake of comparison, it may be noted that 86 countries are Parties to the 1925 Convention, 99 countries are Parties to the 1931 Convention, and 49 countries are Parties to the 1953 Protocol.

⁹ See Report of the Permanent Central Narcotics Board for 1966 (Document E/OB/22, para. 33-38) and Final Report of the Permanent Central Narcotics Board and Drug Supervisory Body—November 1967 (document E/OB/23-E/DSB/25, paras. 47 and 48).

¹⁰ Document E/OB/22, para. 41.

suppose that the amount of opium annually available for misuse is in fact far greater than this.

23. Although the illicit traffic in opiates constitutes the most serious threat, the situation in regard to coca leaf and cannabis continues to be grave.

Coca leaf

24. The quantities of coca leaves required annually for the legal manufacture of cocaine and as a flavouring agent for beverages vary between 200 and 500 tons; but statistics furnished to the Board by Bolivia and Peru, the principal growing regions, reveal an annual harvest of 12,000 to 15,000 tons. Most of this is chewed by the Andean Indians. Since the statistics are generally based on the octroi records and in view of the inaccessibility and difficulty of control of much of the terrain, there is good reason to suppose that the harvest is in fact much greater than this. Clandestine manufacturers of cocaine therefore have little difficulty in obtaining ample supplies of raw material and in recent years there have been definite signs that the illicit traffic in cocaine is increasing.

Cannabis

25. Cannabis is very widely abused. It appears under a variety of names almost throughout the world and is extremely difficult to control.

26. In recent years the problem has assumed serious proportions in industrially advanced countries which were previously not affected; its consumption by certain elements in the younger generation appears to some observers to be a symbol of revolt against the established order of things.

27. While established opinion in regard to cannabis has latterly begun to be questioned in some quarters, the view is still solidly held in authoritative medical quarters that it is a drug of dependence, that it gives rise to public health problems and that its control must be maintained.

PSYCHOTROPIC SUBSTANCES

28. Recent developments have added to the problems posed by opium, coca leaves and cannabis; and the problem of the hour is the widespread abuse of sedatives, stimulants and hallucinogenic substances such as L.S.D. The easy availability and selfadministration of psychotropic drugs, some of which are quite dangerous, call for specific measures of control at the national and international level, lest Governments be faced with an unmanageable situation in a few years.

29. The Board agrees with its predecessor body, the Permanent Central Narcotics Board, that timely and adequate measures are essential if this problem is to be contained within tolerable dimensions. The Permanent Central Narcotics Board's Final Report last year ¹¹ analysed the administrative complexities inherent in the international control of psychotropic drugs and the Board welcomes the wide acceptance which this analysis and its conclusions as to the advisability of a separate treaty received at the 22nd Session of the United Nations Narcotics Commission in January 1968. Recognizing the urgency of the situation the Commission drew up two resolutions which were subsequently approved by the Economic and Social Council calling for the adoption of national legislative control over psychotropic substances where this does not already exist, and the prohibition of the import, export and use of LSD and similar hallucinogenic substances except when under direct government control or under the control of medical or scientific institutions specifically designated by Governments.

30. The Commission also took two other constructructive measures: firstly by directing that the opinion of Governments be sought as to existing and projected national controls over psychotropic substances and in regard to the feasibility of international control over these substances; secondly by requesting that the operative part of a draft international instrument on the subject be drawn up. The Board's secretariat was consulted on the drafting of the questionnaire to Governments, as well as on the draft of a Protocol on psychotropic drugs. In this connexion it should also be mentioned that the World Health Assembly in the spring of 1968 once again stressed the need for the earliest possible action in this matter.

31. Like its predecessor body the Board emphasizes the urgent need for adequate corrective measures, including the early adoption of international legislation on the lines now being considered and its experience is at the disposal of those who are actively concerned with this task.

¹¹ Document E/OB/23-E/DSB/25, para. 112-164.

NATIONAL ADMINISTRATIONS—APPRAISAL OF PERFORMANCE

Reports and statistical returns

32. The proper functioning of the international narcotics control depends to a large extent on the quality of the reports and statistics submitted by Governments in accordance with treaty provisions. It is essential that this information and data should be precise, complete and furnished regularly and on the dates prescribed.

33. The 1961 Convention and the previous Treaties require that Governments shall supply detailed information on the consecutive stages of the trade in narcotic drugs (agricultural production, manufacture, exports, imports, consumption and stocks) and also on seizures. These statistics are examined by the Board with a view to ensuring that no weaknesses exist in the international control system and in particular that no narcotics have been diverted from the licit trade into illicit channels. If, for example, the returns furnished by an exporting country differ from those of the corresponding importing country or if declared stocks do not correspond to the balances on hand as calculated from the statistics, the Board requests the Government concerned to investigate the discrepancies. During 1968, the period covered by this Report, 350 cases of this nature were brought to the notice of Governments

34. The comprehensive statistics are published each year as addenda to the Board's Report and are prefaced by an analysis of the latest trends in the licit movement of narcotic drugs.

ESTIMATES

35. Governments are also required to furnish annual estimates of their requirements of narcotic drugs for the following year. These are examined by the Board which, by suggestions where necessary and by agreement with the Governments concerned, ensures that the estimates correspond as closely as possible to the medical and scientific requirements of that country or territory. Estimates are binding on Governments. The treaties have entrusted the Board with the establishment of estimates when these are not furnished by Governments themselves. The estimates so established are in every respect as binding, and have the same legal and administrative effects, as if they were furnished by the Governments concerned.

LIMITATION ON THE BASIS OF ESTIMATES

36. By means of the estimates thus examined, confirmed or established and annually communicated to all Governments, irrespective of whether they are Party or not to the Conventions, the Board ensures that the supplies of narcotic drugs remain for each country and territory within the limits of its estimated legitimate needs for the particular year. The Board calculates from the estimates the maximum quantities of each drug which a country or territory may manufacture and/or import. By continuous comparison of the trade statistics of each country with its estimates, the Board is able to discover when these limits are exceeded, and to take appropriate corrective measures. In 1968 so far, the Board has intervened in 140 cases in which the limits were exceeded by a sufficient margin to necessitate a request that the Governments concerned should apply the corrective measures.

37. If realistically drawn up and observed the estimates go far to ensure that narcotic drugs are limited to scientific and medical purposes. The system will continue to work satisfactorily so long as Governments endeavour to ensure that the calculated limits are strictly observed in the granting of licences for manufacture and imports.

38. At the end of each calendar year the Board is able to apply a further measure of control by comparing the over-all statistical information at its disposal with the estimates furnished for that year and is able in this way to ascertain whether Governments adhere to the estimates in other respects. A statement showing this comparison is published as one of the addenda to the Board's main Report.

EFFECTIVENESS OF STATISTICAL CONTROL

39. In taking over the functions of the Permanent Central Narcotics Board and Drug Supervisory Body, the Board has inherited a comprehensive body of narcotics records. The statistics supplied to the Board are of course affected by differences in national administrative practices and in the development of national medical services; and the comparability of statistics also varies according to whether they relate to agricultural products such as opium, coca leaves or cannabis rather than the more easily controlled manufactured drugs. Nevertheless the Board is able by comparison and interpretation to exercise close supervision over the licit trade in all narcotic drugs, and to evaluate the efficiency of control at the national level.

NEED TO IMPROVE NATIONAL NARCOTICS CONTROL ADMINISTRATION

40. It is incumbent upon Governments to ensure that this information is prepared by a competent staff possessing the knowledge and experience required to meet the obligations they have assumed. While many Governments maintain the required standards of efficiency, the performance of some others leaves room for improvement. The tendency to underestimate the dangers of the narcotics problem in their respective countries sometimes results in an attitude bordering on indifference with regard to the collection and analysis of material by officials in charge of these duties. In some countries the work is done by a single official working without a deputy or assistant who could replace him in time of need or succeed him when he eventually leaves his post. The inevitable result is a lack of information when he is absent or only intermittent and badly prepared information until a successor is trained.

41. The information and reports are at times incomplete and lack essential details. They are frequently prepared in a routine fashion, are sometimes contradictory and, with regard to the estimates, merely repeat the previous year's data without reference to any changes or developments which may have occurred.

42. Shortcomings of this nature inevitably weaken the control at the international level and the Board looks to Governments to remedy the deficiencies wherever they occur. It is at all times ready to offer advice and assistance to whatever extent may be possible. 43. The Board is also willing, within the limits of its competence, to advise and assist Governments in the establishment and improvement of national control. Past experience has shown that personal contacts with officials responsible for national control and the furnishing of reports and returns can be of considerable value, both to Governments and to the Board and its work. Indeed the need to reinforce the collaboration between these officials and the organs of international narcotics control is so pressing as to call for the allocation of substantial additional funds for this form of technical assistance.

44. Although it is gratifying to note that the number of statistical returns received in 1968 represented 95 per cent of the maximum, the Board is once again reluctantly obliged to mention in its Report countries which have failed to comply in this way with the provisions of the treaties. It takes this course only when repeated approaches to the Governments have proved ineffective. For 1968 the countries in question were Mongolia, Nepal and North Viet-Nam.

45. The Board also feels obliged to repeat the regret expressed by its predecessor, the Permanent Central Narcotics Board, at the lack of information in regard to these areas and to China (mainland) and North Korea.

LICENSING

46. The ability of national administrations to collect and collate the required data on the licit movement of narcotic drugs is governed by the extent to which they are in effective control of persons, establishments and organizations engaged in this particular sector of activity. An essential factor in this control is the efficacy of the licensing system; and regulation of the legal trade will only be successful if a tight and continuous check is maintained on the issue and validity of licences.

MANUFACTURE OF DRUGS AS A NEW ECONOMIC ACTIVITY

47. It is a cardinal requirement that narcotic drug manufacture should only be introduced after the Governments concerned have fully satisfied themselves that adequate means of control exist. If this condition is not satisfied there will not only be a risk of an illicit narcotics problem developing in that country, with accompanying dangers of addiction amongst the local population, but the security of its neighbours will be jeopardized and the efficiency of the international control of the licit trade as a whole will be adversely affected.

INFORMATION ON THE EXTENT OF DRUG DEPENDENCE

48. An essential condition to success in finding a solution to any social problem is a correct assessment of its nature, extent and the consequences likely to follow if it is neglected. The Board shares the opinion of its predecessors that in a number of countries the problem of drug dependence is dangerously underestimated.

49. This attitude is responsible for the lack of energy sometimes shown in applying control measures and for reluctance to commit adequate administrative and financial resources to meet the danger while there is still time to contain it. Certain Governments who failed or hesitated to admit that their country had an addiction problem have later discovered that misuse of narcotics was relatively widespread in their country. Addiction figures given in national reports are often so low compared with conservative estimates by international organs that it is difficult to accept them as conforming to reality.

50. The Commission on Narcotic Drugs has frequently requested Governments to try to provide information on the number of addicts, with supplementary information if possible as to sex, age, occupation, origin of addiction, source of supply, drug or drugs abused, etc. or at least informed estimates if actual data could not be supplied. Admittedly this is not an easy task and it is complicated by differing constitutional, legal and administrative systems and standards, and by the traditional professional secrecy of the medical profession. Nevertheless the Board hopes that Governments will use their best endeavours to provide realistic information along these lines.

TREATMENT AND REHABILITATION OF ADDICTS

51. It is essential that medical treatment should be within the reach of addicts and that measures be taken for their rehabilitation; this postulates the provision of specialized medical and rehabilitation facilities in all countries with a drug dependence problem. The Board strongly supports the recommendation of the World Health Organization and the Commission on Narcotic Drugs that all Governments which may be concerned should as soon as possible establish such facilities.

PENAL LAW

52. The Board welcomes the recommendation of the Commission on Narcotic Drugs that efforts be made to strengthen the penal provisions relating to international illicit traffic in narcotic drugs. There is room for improvement in two particular respects. (a) the imposition of deterrent penalties on convicted offenders, and (b) the need to prevent traffickers from escaping prosecution on purely technical grounds of lack of jurisdiction. This latter loophole could be closed if trafficking in narcotic drugs were made an extraditable offence or if arrangements were made for the expulsion of such offenders from the country in which they have taken refuge. Because much of the illicit traffic in narcotic drugs is international it is necessary to improve the machinery for direct, informal and rapid co-operation between national enforcement agencies. Co-operation between adjoining States should be strengthened wherever and as soon as possible.

IMPORTANCE OF CONTROLLING NARCOTIC RAW MATERIALS

53. An important and necessary check to illicit traffic would be to curtail the supply of narcotic raw materials, particularly opium and coca leaves destined for the illicit manufacture of morphine, heroin and cocaine. This can be approached in two ways:

- (a) by tighter control over licit production with a view to prevention of leakage; and
- (b) by the eventual elimination of the uncontrolled or illicit production which is the major source of supply for clandestine manufacture.

CONTROL OF LICIT PRODUCTION

Opium

Need for adequate surveillance

54. Any consideration of the economic future of opium as the primary raw material for morphine and for the consequent manufacture of codeine must take into account the increasing competition from poppy straw. The possibility that an acceptable synthetic substitute for codeine may appear should not be excluded. While opium continues to be produced, however, there is always a danger of leakage from legal cultivation into the illicit market, and in view of the difficulty of controlling an agricultural product of this nature it is of the utmost importance that everything possible should be done to maintain a high standard of surveillance.

55. It is beyond doubt that a disquietingly large quantity of opium is diverted each year from licit production. The Board appreciates that control over an agricultural product like opium is by no means easy. Nevertheless the situation could be substantially improved if all the authorities concerned would more closely apply the relevant provisions of the 1953 Protocol or the 1961 Convention, for example by restricting production to districts specified by the National Opium Monopoly and to licensed farmers.

Licences

56. To facilitate and strengthen the control, the licence of each cultivator should specify the measurements and location of the plot he intends to sow. These particulars should be verified by inspection and measurements after the poppy has begun to grow, to ensure that additional opium is not produced for sale to traffickers.

57. The granting of licences should be strictly controlled: if a cultivator is suspected of withholding part of his crop from the monopoly his licence should be withdrawn. In this connexion the Board commends a practice which has been adopted with excellent results in India, whereby licences are refused to cultivators whose opium yield per acre is comparatively low and a premium is paid to those who achieve a high yield. This tends to eliminate both inefficient farmers and those who sell part of their produce on the illicit market.

58. Delays in the collection of opium give rise to theft and diversion and it is essential that immediately after the harvest the crop be delivered to the Opium Monopoly. Severe penalties should be imposed on traffickers found guilty of buying from farmers, and on farmers convicted of selling to anyone other than the Monopoly.

Constructive measures by Turkey

59. It has been particularly gratifying therefore to learn of the decisions of the Government of Turkey to terminate opium production in its outlying border areas where there was a continual risk of leakage over the frontier into neighbouring countries, and to concentrate the cultivation of the opium poppy in the centre of the country where it could be more adequately controlled. This measure and the prospective improvement of the control administration are commendable and should show good results. The Board welcomes this co-operative attitude on the part of the Government of Turkey and will follow the results of these reforms with close interest.

Plan to eliminate remaining opium production in Burma

60. It also felicitates the Government of Burma on its decision to extend its prohibition of opium poppy cultivation to the area east of the Salween River where opium smoking is still practised and it hopes to receive reassuring reports on the progress of this extension of control.

Inadvisability of new opium production

61. The difficulties inherent in applying effective control over an agricultural product make it most inadvisable that opium production should be undertaken outside the existing areas of licit poppy cultivation. The Permanent Central Narcotics Board drew attention to the fact that certain countries had been contemplating such action and that agricultural advisers to developing countries had sometimes recommended opium as a possible cash crop to diversify or expand a limited agricultural economy.

62. The present Board feels it should be made abundantly clear that any country embarking on the production of opium would find itself faced with legal, administrative and economic difficulties. For example, the 1961 Convention requires that before commencing (or increasing) the production of opium a Party must first ensure that this would not result in over-production in the world at large; and it would not be possible to satisfy this condition since the present production level is already sufficient for legitimate needs.

63. Moreover the control measures prescribed by the 1961 Convention and the 1953 Protocol would be costly and difficult to administer. It has taken many years for the traditional opium-producing countries to develop and consolidate their control structure; and even so they have not been wholly able to prevent the diversion of opium into the illicit traffic. Obviously therefore a country embarking on opium production might quickly become a centre of the illicit traffic endangering the health and well-being of its own inhabitants and those of neighbouring countries.

64. From the economic standpoint also such a venture is unattractive in view of the low market price of opium and particularly if there should be increasing resort to poppy straw as an alternative source of morphine.

65. It has further to be remembered that 90 per cent of the morphine obtained from opium is used for the manufacture of codeine, so that opium's long-term economic future is continually threatened by the possibility, alluded to in paragraph 54, that a synthetic codeine substitute might be evolved which would be generally adopted by the medical profession.

Increasing use of poppy straw

66. Looked at solely from the standpoint of control, the growing recourse to poppy straw is welcome since it is too bulky to be a raw material for the clandestine manufacture of morphine and heroin, and if in the course of time the world's legitimate requirements of morphine should be still further met from poppy straw, international narcotics control will to that extent be eased.

Advisability of reassessing the economics of traditional opium production

67. The foregoing considerations also provide cogent reasons for the traditional producing countries to re-examine the validity of opium as a feature of their agricultural economy and to explore the possibility of replacing it by other and more profitable crops. 68. In its Report for 1966¹² the Permanent Central Narcotics Board commented on the field costs of opium production in some countries and pointed out that where the standard of living has risen or is rising, the financial return to the farmer in real terms is so slender that it is doubtful whether the activity is at all economic. In blunt fact it only becomes lucrative for the farmer if he sells part of his crop on the illicit market. Replacement of opium by other and more freely marketable crops therefore would be in the interest alike of the farmer and of the agricultural economy of the country, and would also benefit international narcotics control.

Coca leaf

69. Organized cultivation of the coca leaf is at present only permitted in Peru and Bolivia: the smallscale licit production in Indonesia ceased in 1967. Production is now prohibited in Colombia and Ecuador but coca leaves nevertheless continue to be harvested there.

70. If production of coca leaves were to be authorized only for the manufacture of flavouring agents and cocaine the control problem would be manageable and capable of solution, since the annual requirement for these purposes is no more than 200-500 tons. Authoritative medical opinion holds that coca leaf and its preparations have no place in modern medicine and that cocaine itself, though still used, is more and more becoming regarded as obsolete and is being replaced by effective local anaesthetics without liability to produce dependence. Statistics confirm that the medical usage of cocaine has been diminishing over the years.

71. Coca cultivation in Peru and Bolivia however is not directed only to the authorized manufacture of cocaine and flavouring agents: the vast bulk of the leaf produced goes to satisfy a long-established and deleterious habit amongst the Andean Indians, many of whom live in precarious economic conditions and resort to chewing the leaves to quell the pangs of hunger.

72. Prima facie it could be argued that the cocachewing habit is a local public health problem of concern only to the countries of the Andean Highlands since it hinders the economic and social progress of these regions. However it carries serious international implications.

73. To meet the demand created by this habit the cultivation of coca leaves has expanded considerably. Because of the physical impracticability of surveillance over the extensive areas of production, clandestine manufacturers of cocaine have been able to locate themselves conveniently near and to obtain ample

¹² Document E/OB/22, paras. 50 and 51.

supplies of their raw material. The cocaine so produced then passes through international illicit channels to several victim countries.

Lines of action

74. It is in the international interest as well as in the economic and social interest of the Andean regions that coca leaf production should be reduced and brought under control. Action is required on two fronts: to reduce the areas of organized production to manageable proportions and, in parallel, progressively to reduce and eventually eliminate the coca-chewing habit.

75. The Board recognizes that this twin course of action presents serious socio-economic difficulties. Traditional agricultural patterns will need to be reorientated and coca cultivation replaced by nutritive and readily marketable crops produced under more modern methods of cultivation; and the Andean Indians must be weaned away from the chewing habit by intensive and sustained public health and educational programmes and by improving their standard of living. In an area poorly endowed by nature the task is clearly a formidable one and will take years to accomplish. The authors of the 1961 Convention were conscious of this and allowed a period of 25 years—from the date of the entry into force of the treaty in 1964-for the progressive elimination of the non-medical use of coca leaves. This presupposed however that reform should begin at once and should be consistently and increasingly pursued throughout the 25 years. The Board emphasizes this assumption since it would be unrealistic to expect that a task of such dimensions could be achieved if action were postponed until the latter part of the allocated period.

Major role to be played by the Governments of Peru and Bolivia

76. Although uncontrolled coca cultivation in Colombia and Ecuador also gives cause for concern, the international community must continue to look principally to the authorities of Bolivia and Peru if substantial progress is to be made.

77. The Governments of Peru and Bolivia do not dispute that coca leaf chewing is harmful and the Board recognizes their desire to eliminate the habit and to reduce the production of coca leaves for this purpose.

78. The Board understands that constructive measures were launched in Peru some time ago with the aim of reducing the areas of organized coca cultivation by as much as 10 per cent every two years. The Board would be very interested to learn what progress has been so far achieved. It is vitally important that the momentum of the campaign should be maintained and the Board earnestly requests the Peruvian authorities to concentrate their efforts in this endeavour. 79. The Board would address a similar appeal to the Bolivian authorities. It attaches importance to the agreement concluded between Bolivia and the Permanent Central Narcotics Board¹³ which envisages the gradual elimination of coca chewing and the production of the leaves, and it will follow with the greatest interest the measures to be taken under the terms of the agreement. In particular it hopes that useful progress is being made in the current studies directed towards replacing the coca leaf by other crops and it trusts that it may very soon be informed that a practical plan of action has been drawn up and set in motion.

80. The Board is anxious that the authorities should not allow themselves to be daunted by the magnitude of the problem and thereby undermine such progress as has so far been made. A vigorous momentum must be built up and maintained and the Board calls upon the Governments of Bolivia and Peru to continue to concentrate their immediate efforts in the following sectors: firstly the active prohibition of any new coca leaf planting; secondly the application of measures whenever and wherever possible to restrict authorized cultivation to specified districts; and thirdly a strengthening of the enforcement services employed in the drive against clandestine cocaine manufacture and in the pursuit and prosecution of illicit traffickers.

81. Economic advancement and the elimination of the chewing habit however continue to be the key to an effective solution of the problem and they are interrelated. Coca leaves are often, perhaps mostly, chewed to alleviate the pangs of hunger, and it has been observed that when coca chewers change their environment and receive an appropriate and balanced diet, they often give up the habit.¹⁴ It is evident therefore that economic uplift and public health programmes must proceed hand in hand.

82. On the educational front a substantial contribution could be made by both public and private institutions.

Need for international aid

83. The effective replacement of coca cultivation by other crops will in fact entail a radical change in the agricultural economy, for which substantial administrative, technical and financial resources will be needed. Such a major change can only be achieved with the support of external assistance based on a comprehensive plan drawn up after careful study.

84. It is gratifying to know that the Altiplano area in Bolivia is scheduled for economic improvement with

¹⁸ Documents E/OB/20, para. 32 and E/OB/22, para. 95, 96 and 97.

¹⁴ See Statement of the representative of the World Health Organization at the 22nd Session of the Commission on Narcotic Drugs (document E/4455, para. 303).

the assistance of the United Nations Development Programme. Although this area is slightly outside the coca-growing regions, the Board hopes that when the programme is implemented the Bolivian and UNDP authorities will be able to extend its purview so as to take account of the coca leaf problem, which calls urgently for attention. In its resolution 1105 (XL) the Economic and Social Council invited the United Nations and the specialized agencies to give such assistance, which should not be delayed if the intentions of the 1961 Convention in this respect are to be fulfilled.

Cannabis

85. Relatively to its illicit production, the organized cultivation of the cannabis plant for its fibre and for

its oil-bearing seeds is not on a large scale and the plants are not in general used for extraction of the drug content.

86. There is also a certain licit production of cannabis for traditional medical and non-medical purposes in India and Pakistan and adjacent northern countries, but otherwise the non-medical use of cannabis is almost universally prohibited. Both India and Pakistan have prohibited the use of cannabis resin and have undertaken to bring the non-medical use of cannabis to an end within a period of 25 years from the entry into force of the 1961 Convention. Although in the opinion of the World Health Organization cannabis preparations have no intrinsic medical value, certain countries continue to use cannabis for medical purposes.

UNCONTROLLED AND ILLICIT PRODUCTION OF CANNABIS

87. Illicit production of cannabis is widespread and its elimination presents great and complex difficulties. The plant can grow almost anywhere and the drugs obtained from it appear increasingly in the illicit traffic. Bearing in mind the grave social ills which can and do result from this traffic, it is clearly incumbent on all Governments concerned to take every means at their disposal to eradicate the illicit production of cannabis.

88. In some areas, however, much of the local population now depends for its livelihood on the sale of cannabis. Where this is the case, the elimination of production will call for economic and social measures to raise the standard of living of the cultivators, and in some instances international assistance will be needed.

LEBANON'S CAMPAIGN TO ERADICATE CANNABIS PRODUCTION: NEED FOR EXTERNAL ASSISTANCE

89. The Board welcomes the decision of the Lebanese Government, as part of its "Green Plan", to eliminate cannabis cultivation in its territory. From the latest reports and from the detailed review of the situation presented at the 22nd Session of the Commission on Narcotic Drugs, it is evident that the Lebanese authorities are making a genuine and constructive

effort towards fulfilment of the plan and deserve to be strongly supported in this endeavour. They have incurred substantial expenditure on agricultural equipment and in granting support prices to encourage the cultivation of the new substitute crops, and further commitments will be entailed in the progressive enlargement of the reclaimed agricultural area. At the 22nd Session of the Commission the Lebanon representative called for international assistance under three heads: firstly, moral support to enable his Government to defend its initiative in the cause of humanity; secondly, assistance in the form of capital equipment for processing the products of the substitute crops such as sunflower seeds and aromatic oils, and short-term technical assistance to bring the equipment into operation; and thirdly, a number of three-to-fouryear bilateral purchase agreements with Lebanon for the products obtained from the substitute crops, principally sunflower seed oil and tobacco, at prices sufficient to cover the Government's investment.

90. Successful completion of this programme would undoubtedly represent a major advance in the campaign against the international illicit traffic in cannabis, and the Board feels that the appeal by the Lebanese authorities for assistance in this important reform should not go unheeded. Success would also constitute an encouraging precedent for similar efforts in other countries.

UNCONTROLLED AND ILLICIT PRODUCTION OF OPIUM AND COCA LEAVES

91. The illicit traffic in cannabis, in cocaine and in the opiates have a common feature in that by far the greater part of the raw material of all three groups comes from uncontrolled or illicit production. The Board has indicated the benefits which would certainly flow from more efficient control of the legal production of opium and coca leaves, but it endorses the opinion of its predecessors that no real progress will be made in the international narcotics campaign until the uncontrolled and illicit production of these substances is substantially reduced. The coca leaf situation is indisputably grave. As for opium, illicit and uncontrolled production in different parts of the world offers an enormous source of supply, actual and potential: indeed the total yield from South East Asia alone is confidently estimated to exceed the total licit world production for legitimate purposes.

92. The gravity of this situation has been set out in the Permanent Central Narcotics Board's last two annual reports.¹⁵ The lack of control in the areas in question chiefly derives from an inadequate administrative structure or from the fact that they are difficult of access and are therefore beyond the effective authority of their Governments. In many of these areas, moreover, opium production is of very long standing and is closely bound up in the social practice of the local populations; and it is often of critical importance to them as being the only cash crop in a desperately poor agricultural economy.

93. In such circumstances, the only hope of achieving substantial progress would be by means of a broadly based programme of economic and social advancement and the present Board agrees with its predecessors that an essential first step is to undertake a study of the financial and administrative implications of such a programme, so that the practicability of undertaking it, perhaps by stages, can be further explored.

¹⁵ Document E/OB/22, para. 56-125, and document E/OB/23-E/DSB/25, para. 87-89 and 92.

NEW PERSPECTIVES IN THE CAMPAIGN AGAINST DRUG ABUSE

THE GENERAL SETTING

94. The evident proliferation of drug abuse has led the Permanent Central Narcotics Board, in its annual reports over the last five years, to urge Govvernments to co-operate in measures to meet this aggravation of the problem and the actual course of events has fully borne out their diagnosis of the risks involved. Their apprehensions of the potentially grave social consequences were echoed by representatives of Governments in the debates of the 44th Session of the Economic and Social Council (May 1968).

95. The present Board endorses this assessment of the situation and in the light of recent developments it feels impelled to add that unless the self-administration of dependence-producing drugs for non-medical purposes, particularly by the young, is effectively checked it could seriously detract from a country's social and economic progress.

96. The Board appreciates that in the present troubled state of the world the attention and energies of Governments are absorbed by events which overshadow the phenomenon of drug abuse and dwarf the importance of this abuse as a social problem. While in some countries conscientious efforts, both public and private are being made to cope with the problem, in others the impact of more urgent considerations may cause it to be displaced in the governmental scale of priorities and thereby hamper the national authorities concerned in their response to the longterm dangers for society inherent in this abuse, which in some parts of the world is rapidly gaining ground particularly in the younger age-groups at all social levels. 97. Any real or apparent falling-away in active, continuous interest in drug problems, whether on the part of the general public or of national control authorities, is bound to create a climate conducive to increased misuse, both of the better-known drugs such as opiates, opioids, cocaine, and cannabis and of the psychotropic substances.

COUNTER MEASURES

98. The Board accordingly urges Governments to intensify their measures against the illicit traffic in dependence-producing drugs in their respective territories and to protect the actual and potential drugdependent persons by providing programmes for the treatment and rehabilitation of those already dependent and by furthering educational and other social measures designed to prevent the development of drug abuse in the first instance.

99. As one step towards greater fulfilment of these endeavours it is essential that Parties to the 1961 Convention should fully implement its provisions and that non-Parties (even those who already comply with its obligations) should become Parties as speedily as possible and, in the meantime, should comply with the other international instruments on narcotics to which they are Parties.

THE MAIN ELEMENTS OF THE PROBLEM

100. The basic factors in the social problem of drug abuse are the demand created by those who abuse or are dependent on drugs, the supply by the illicit trade to meet that demand, and the reaction of society in defending itself against the harmful effects of drug abuse. The first two of these factors, though complementary to each other and indeed inseparably intertwined, spring from entirely different motives, the drug-dependent person being driven by a compulsive need while the trafficker is actuated by the prospect of a calculated material gain at whatever cost in human misery.

101. Yet, because these two closely linked factors appeared to constitute a single social problem, it was assumed that the problem could be adequately met by the simple application of traditional defensive measures aimed at safeguarding the legitimate interests of society and penalizing activities which are antagonistic to these interests. In the context of dependenceproducing drugs this meant on the one hand to restrain normal trade to quantities sufficient to satisfy medical and scientific needs, and on the other hand to prohibit supplies for non-medical purposes and treat any infraction of this prohibition as a crime.

102. This approach indeed achieved dramatic results. As related in the reports of the Permanent Central Narcotics Board for 1966 and 1967,16 the implementation of the 1925 Convention establishing control over international licit trade and the 1931 Convention imposing a quantitative limitation on drug manufacture stemmed the previous spate of manufactured narcotic drugs from authorized factories into illicit channels and thereby checked the spread of drug addiction, which in the twenties and early thirties had assumed epidemic proportions. Since then the illicit manufacture of drugs has been progressively narrowed down to clandestine manufacture in a few regions where the raw materials are locally produced or can be readily imported; and, more recently, close control over these raw materials too has been introduced first by the 1953 Protocol and then by the 1961 Convention, which has outlawed the production, trade and use for non-medical purposes of all narcotic substances including narcotic raw materials.

103. The striking success of the 1925 and 1931 Conventions, subsequently extended by the 1948 Protocol, created a feeling of confidence that drug abuse could be held in check and ultimately eliminated by strict implementation of the 1961 Convention, subject to the proviso that in certain parts of the world some non-medical uses of narcotic substances, which it would be impracticable to terminate immediately, should be eliminated within a prescribed period.

104. This feeling of confidence encouraged the view in some quarters that a legal-administrative approach based on prohibition and punishment would not only check the illicit traffic but would also lead to the eradication of drug dependence. Drug abuse was in general treated as a crime and the drug-dependent person as a criminal. Defensive strategy was mainly directed towards control of production and distribution of drugs and the suppression of illicit traffic; and relatively few efforts were devoted to the treatment and rehabilitation of those already dependent and of educational measures to counteract the spread of abuse.

105. This optimistic assessment was not borne out by experience, and increased knowledge dispelled the previous misapprehension of the very different motives which actuate the drug-dependent person and the trafficker.

106. At all levels the trafficker is motivated by material gain, a gain calculated and measured in terms of money; and in planning his transactions he carefully balances his prospective profit against the risk of arrest and possibly severe punishment.

107. On the other hand, eminent professional opinion holds that persistent abuse of narcotic drugs is often associated with psychic disabilities or socio-

¹⁶ Document E/OB/22, para. 33-38 and document E/OB/23-E/DSB/25, para. 47 and 48.

economic disadvantage on the part of the user. Whatever the cause the dependent person's demand is not of the kind to which the laws of the free-market economy apply. It is a craving that has to be satisfied whatever the price, including the risk of conflict with the law. It blinds him to the risks he is taking and under its stress the confirmed addict will commit a variety of unlawful acts to satisfy his need: the threat of punishment does not deter him. In some instances even, dependent persons engage in small-scale trafficking in order to obtain their daily dose of drugs.

108. The compulsion that forces its victim to commit unlawful acts beyond mere possession of a drug for his own use underlies the erroneous assumption that drug dependence arises from a criminal predisposition.

109. The basic differences between the personalities of the drug-dependent person and the non-dependent trafficker obviously call for the application of different means to restrain their activities and this view is gaining ground in countries where there is a serious degree of drug abuse. There is in some countries a discernible shift from the punitive method of dealing with drug-dependent persons to a psychiatric or other medical approach and to the study of the entire problem using methods of scientific research involving many professional disciplines. This school of thought recognizes that the treatment of drug-dependent persons requires the use of specialized techniques adapted to different types of dependence and different causes of such dependence; and in a few countries different methods are being tested empirically.

110. The limitation now imposed on remedial action by lack of adequate knowledge would be eased if more active support could be provided from public or private sources towards the extension of research facilities and trained personnel. There is in fact in a number of countries a gratifying spread of research into various aspects of the phenomenon of drug dependence and there can be no doubt that in due season this public-spirited work will yield valuable data which will help to determine the future patterns of preventive and redemptive measures. What is needed at the moment is a means of collecting, collating and interpreting the results of the research, of stimulating further research in sectors where it is most urgently needed and of making the fruits of these investigations more readily available to those concerned with the upbringing of the younger generation and with the emergence of a public conscience in these matters.

111. The Board joins with its predecessor body in welcoming the initiative taken in the United Kingdom by setting up an "Institute for the Study of Drug Dependence", an independent organization devoted to the promotion and co-ordination of research and to the dissemination of informed opinion on this subject. It is to be hoped that there will be similar ventures in other countries which have a special interest in the problem, in order that the results of research may be freely interchanged and made widely available, thereby enlarging the prospect of alleviating the human suffering and misery caused by drug dependence.

(Signed) Harry GREENFIELD

President

(Signed) Joseph DITTERT

Secretary

Geneva, 8 November 1968.

(Signed) Leon STEINIG

Rapporteur

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