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Statement by Professor Hamid Ghodse, President of the International Narcotics Control Board

Excellencies, Ladies and Gentlemen,

Thank you for this opportunity to address this important Ministerial Conference of the African Union on drug control and crime prevention. The issues addressed by your Conference directly relate to the primary mandate of the International Narcotics Control Board, which is to promote Government compliance with the three United Nations conventions on drug control. As you well know, drug control is crucial in maintaining a healthy society and in preventing the suffering and harm caused to individuals and society by drug abuse and drug trafficking. Drug control is also critical in ensuring legitimate access to drugs for medical and scientific purposes.

Drug trafficking in Africa has gained increasing international attention over the past years, as illustrated by the recent discussions of the Security Council on the issue of drug trafficking and its threat to stability and security. However, the Board remains concerned over the inadequacies of regulatory drug control in the region and the vulnerability of the region to diversion of precursor chemicals.

Allow me to outline the Board's view of these challenges of drug control in Africa and propose some solutions. Of particular concern to the Board are three key problems: the availability of illicit substances on the unregulated market; the limited availability of analgesics for treatment of pain; and the diversion of precursors.

Availability of substances on unregulated markets – a serious health problem

Illicitly manufactured or diverted pharmaceutical products containing narcotic drugs and psychotropic substances are still available on unregulated markets in many African countries.

This poses a serious public health problem by providing access to poorly or incorrectly labelled medicines that are ineffective, substandard or even deadly.

In most countries in the region, there are weaknesses in national systems for the control of licit manufacture, import and export, and distribution of pharmaceutical products. Often the national competent authorities lack the capacity to adequately develop, implement and monitor a national regulatory system. The result ... internationally controlled substances can be obtained without a prescription or on unregulated markets. The unregulated markets range from ad hoc outlets at village fairs or markets to more organized systems. The range of preparations containing psychotropic substances available on unregulated markets is wide. It can include benzodiazepines, phenobarbital, slimming tablets and analgesics. Often these preparations are counterfeit products and the sale of drugs through Internet pharmacies adds an additional layer of complexity.

Regulatory control – a crucial element in addressing the drug problem

It is essential that drug regulatory authorities assess the efficacy, safety and quality of drugs before permitting the drugs to be imported, manufactured or marketed. Even where countries do not have the resources to assess all the products, there should at least be a provisional authorization process, which could rely in part on decisions of authorities in other countries with more advanced regulatory systems. Key criteria to effectively regulating the drug market are political will, relevant legislation, organizational capacity, trained professionals, dedicated financial resources, functioning drug inspectorate service and international cooperation. Codes of conduct and ethical guidelines should address the issue of incorrect handling of drugs. The procurement, storage, distribution and dispensing of medicines must be controlled according to specific standards, with inspection and licensing by the national drug regulatory authority. The requirements for internationally controlled drugs are more stringent in order to reduce the risk of diversion.

Governments need to systematically and periodically assess their requirements for narcotic drugs and psychotropic substances to ensure that supplies can meet demand. Records of manufacture, import, export and distribution must be verified to identify discrepancies. The issue must be addressed in national drug control policies and legislation and the drug regulatory authorities must be strengthened. Increasing the availability of drugs through legitimate channels is another measure that can be taken to prevent the diversion of drugs to the unregulated market.

Availability of drugs for medical purposes

There is a consensus among Governments that the medical use of narcotic drugs is indispensible for the relief of pain and suffering and also that the availability of psychotropic substances for these purposes should not be restricted. This is recognised in the 1961 Convention on Narcotic Drugs and the 1971 Convention on Psychotropic Substances. However, there are wide geographic disparities in the consumption of opioid analgesics for the treatment of pain. For example, in 2008, advanced economies in Europe, North America and Oceania accounted for more than 90 % of global consumption of fentanyl, morphine and oxycodone. Access to opioid analgesics is non-existent or almost non-existent in many countries. Based on estimates provided, Africa consumes less than one percent of global morphine consumption, despite representing around eight per cent of the global population for which consumption is reported. In some countries there is an excessive use of narcotic analgesics and psychotropic substances while in others the substances are under-utilised. This is not just due to economic and developmental factors. There are differences in the consumption of opioid analgesics even between countries with similar levels of economic and social development. Other factors affecting the availability of analgesics are: limited training for health professionals; restrictions in national regulations; or administrative policies on distribution, storage and use of opioids that are more strict than what is required by the 1961 Convention on Narcotic Drugs. Many countries, especially in Africa, have difficulties in assessing their opioid requirements or do not give such assessments the necessary attention, often lacking the resources to do so.

Improving the availability of drugs to alleviate pain and suffering

To solve this problem, Governments should identify any impediments to adequate use of opioid analgesics for the treatment of pain and take steps to improve the availability of narcotic drugs and psychotropic substances for the relief of pain. Governments should develop capacity for adequate oversight and well-functioning regulatory systems, both in the interest of improving availability of drugs for medical purposes but also for reducing the availability of drugs on unregulated markets.

The regulatory systems should fulfil the following functions:

- Ensure the safe delivery of the best affordable drugs to those patients who need them,
 while preventing the diversion of drugs;
- Establish a comprehensive registration and authorization system;
- Stimulate, through regulation and monitoring, ethical behaviour in drug marketing and information, and ensure high standards of health care;
- Ensure the correct training and education of health professionals and educate the public in the rational use of narcotic drugs and psychotropic substances.

To be sustainable in countries with poor infrastructure and urgent basic needs, such measures must be carried out in the context of the overall health care system to ensure sustainability.

Precursor control

While significant progress has been made in Africa in the area of precursor control during the past two decades, new challenges are emerging. Let me share some of them with you.

As we all know, illicit drug manufacture can take place anywhere with easy access to "the ingredients" - the chemical substances needed for the manufacture of most illicit drugs. As control over these substances strengthens in other regions, criminal networks have turned to Africa, a region confronted by a combination of challenges, including widespread poverty, a weak legislative framework and limited law enforcement capacity. Substantial evidence shows that Africa is being used by traffickers to obtain precursor chemicals for the illicit manufacture of drugs. The Board is concerned about the increased seizures of precursor chemicals in Africa, particularly in West Africa, and the use of some African countries as transit points for illicit shipments of precursor chemicals destined for other regions. Furthermore, lack of capacity in the competent authorities of many African countries makes the region more vulnerable to the diversion of precursors.

Preventing the diversion of precursor chemicals

The United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances of 1988 (the 1988 Convention) enjoys nearly universal adherence. One of the most important objectives of the 1988 Convention is to prevent the diversion of precursor chemicals from licit trade into illicit channels. The Board is pleased to note that most African countries are parties to the 1988 Convention.

To address the challenges regarding the diversion of precursor chemicals, the Board calls on Governments in Africa to participate actively in its international initiatives, Project Prism and Project Cohesion. These projects have successfully reduced the availability of the key precursors used in the illicit manufacture of amphetamine-type stimulants, cocaine and heroin over the recent years. Furthermore, the Board urges African countries to make full use of its pre-export notifications online system (PEN Online), which is being used by 115 Governments for the speedy exchange of information on shipments of precursors. PEN Online has become the corner stone of international precursor control, and has contributed significantly to preventing the diversion of precursors into illicit channels. However, about 70 percent of African countries are not yet users of the system.

In addition, the Board requests African countries to give priority to strengthening national legislation and control measures on precursor chemicals. Last but not least, the Board encourages African countries to improve regional cooperation in precursor control. Other Governments and relevant international organizations are also encouraged to assist African authorities in training and capacity-building. The Board is convinced of Africa's commitment to counter the trafficking of precursor chemicals, and looks forward to the continued cooperation and vigilance of Governments in Africa in this regard.

Conclusion

To tackle the problems of diversion of precursor chemicals, availability of drugs on the unregulated market and the availability of drugs for medical purposes, coordinated action must be taken at the national, regional and international levels. Therefore, the Board applauds the revision of the Plan of Action to incorporate strategies and activities aimed at addressing these problems. Of particular importance will be efforts to enhance the capacity of national regulatory authorities in the implementation of the drug control conventions.

I would like to close by emphasising that efforts against the trafficking in and abuse of narcotic drugs and psychotropic substances must not adversely affect the availability for medical purposes. This delicate balance is what the 1961 and 1971 drug control conventions seek to achieve. The regulatory control system, in particular the system of estimates and monitoring, is of crucial importance in achieving the balance between availability and the prevention of diversion and abuse. Through the admirable efforts of African nations and the African Union, Africa is moving swiftly towards improved drug control, and the Board offers its full assistance in ensuring adequate drug control, continent-wide.

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