CHECK AGAINST DELIVERY

STATEMENT BY THE PRESIDENT OF INCB

Economic and Social Council Substantive Session 2012 General Segment

Agenda item 14 (d) Narcotic drugs Report of the International Narcotics Control Board for 2011

Report of the International Narcotics Control Board (E/INCB/2011/1), accompanied by: Narcotic Drugs: Estimated World Requirements for 2012 — Statistics for 2010 (E/INCB/2011/2); Psychotropic Substances: Statistics for 2010 — Assessments of Annual Medical and Scientific Requirements for Substances in Schedules II, III and IV of the Convention on Psychotropic Substances of 1971 (E/INCB/2011/3); and Precursors and Chemicals Frequently Used in the Illicit Manufacture of Narcotic Drugs and Psychotropic Substances: Report of the International Narcotics Control Board for 2011 on the Implementation of Article 12 of the United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances of 1988 (E/INCB/2011/4).

26 July 2012, New York

Mr. President, Excellencies, Ladies and Gentlemen,

On behalf of the International Narcotics Control Board (INCB), I would like to congratulate His Excellency Miloš Koterec on his election as President of the Economic and Social Council. I also congratulate the members of the Bureau on their election.

I am pleased to present the INCB Annual Report for 2011, as mandated for in the international drug control conventions. The Report was presented and discussed at the fifty-fifth session of the Commission on Narcotic Drugs in March this year.

We also presented to the Commission our annual report on the implementation of article 12 of the 1988 Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances — that is, the INCB report on precursor controls — and our technical reports on narcotic drugs and psychotropic substances.

The international drug control conventions aim to ensure the availability of internationally controlled substances for licit purposes, while preventing their diversion to illicit channels and abuse.

As the quasi-judicial body charged with monitoring and promoting the implementation of the three conventions, INCB is independent and impartial, and works to maintain an ongoing dialogue with Governments in the interests of improving the effectiveness of the international drug control system.

The INCB Annual Report highlights achievements and developments in drug control and reviews the functioning of the international drug control system.

We identify weaknesses in drug control and make recommendations to Governments and regional and international organizations accordingly.

The INCB reports for 2011, published in 2012, are dedicated to the centenary of the adoption of the International Opium Convention, which was signed at The Hague on 23 January 1912.

This was the first international drug control treaty and represented a turning point in multilateralism, based on the principle of shared responsibility in addressing the global drug problem.

Its signatories recognized the importance of ensuring access to drugs for medical and scientific purposes, protecting people's health and preventing drug abuse and drug dependency. Much has been achieved since 1912, yet clearly much remains to be done.

The success of the international drug control system depends upon the universality of adherence to and implementation of the treaties. Your vigilance is of paramount importance in ensuring that the system is not weakened by policies or actions that breach the treaties, which have been ratified by 183 States.

In this regard, you will all have seen reports of a recent legislative initiative in Uruguay to legalize the cultivation and use of cannabis.

The Board is currently in communication with the Government of Uruguay to obtain more information and to draw its attention to the problem this measure would cause for the health of young people in Uruguay and for the whole of the international drug control system.

As you know, in 2011, the Government of the Plurinational State of Bolivia denounced the 1961 Single Convention on Narcotic Drugs but has now taken steps to accede to it again, with a reservation concerning some non-medical uses of coca leaf.

The decision on how to proceed now rests with the States parties to the Convention.

INCB, as guardian of the international drug control conventions, cautions in its Annual Report that the integrity of the conventions and the international drug control system itself must be safeguarded.

If States parties started to resort to a mechanism of denunciation and re-accession with reservations to circumvent the implementation of the treaties, the effectiveness of the entire international drug control system could be compromised.

INCB undertook a high-level mission to the Plurinational State of Bolivia in December 2011 to discuss the matter with the Government and is engaged in an ongoing dialogue with the authorities.

Mr. President,

Every year, INCB highlights a specific issue of concern in a thematic chapter of its Annual Report. This year's Report focuses on the interconnections between social cohesion and illegal drugs.

In some communities, drug abuse and drug-related crime have become increasingly prevalent, caught up in a vicious circle of social problems. Drug abuse can be one of the symptoms of a fractured society.

Social cohesion can be affected by a wide range and combination of factors, such as social injustice, unequal land distribution in rural areas, displacement and rapid urbanization, the weakening of the rule of law, corruption and the existence of illicit drug economies.

It is not only the members of such marginalized communities who are at risk of becoming victims of illicit drugs, trafficking and drug abuse but also the society as a whole.

Chapter I of the Report presents recommendations in this regard, in the following areas: drug abuse prevention, treatment and rehabilitation; community policing; social rehabilitation; and the promotion of positive role models.

Rebuilding social cohesion in marginalized communities facing drug problems is a major challenge for all stakeholders: Governments, local organizations, civil society, individuals and the private sector. No matter how difficult it may be to restore social cohesion, it is essential if the long-term health and viability of these communities, and society at large, is to be assured. I therefore recommend that all of you read chapter I of the Annual Report and our recommendations.

Mr. President,

The second chapter of the Annual Report reviews the functioning of the international drug control system, considers the implementation of the conventions and reports on our ongoing dialogue with Governments as regards administering the system of assessments and forecasts of licit requirements and also the system of statistical returns.

This gives us a unique insight into the intricacies of national and international drug control. Our joint mission in this regard is to promote the licit availability of medicines for the treatment of pain and other ailments.

INCB country missions are fundamental to the dialogue with Governments and to an understanding of the drug control situation and the measures being adopted in each country. This enables INCB to provide Governments with constructive and specific recommendations. Between November 2010 and October 2011, the period covered by the Annual Report, INCB conducted missions to Costa Rica, the Czech Republic, Denmark, El Salvador, India, Mexico, Myanmar, Serbia, the United States of America and Zimbabwe, and these are briefly summarized in the Report.

The Board has in the past conducted up to 20 missions a year, but United Nations budgetary constraints and slow responses by some Governments have had the effect of curtailing such activities. I take this opportunity to call on delegations to support the work of the Board by providing adequate and sufficient resources for the various bodies and committees of the United Nations, when considering our budget proposals, in order to enable INCB to continue conducting missions.

The Annual Report presents the results of our evaluation of the implementation of the recommendations made following our missions between 2005 and 2008.

We are grateful for the cooperation of Governments in enabling INCB missions to meet the various parties actively engaged in national drug control and for their subsequent action on implementing our recommendations.

We are also committed to maintaining a constructive dialogue with civil society. Non-governmental organizations (NGOs) carry out excellent work at the grass-roots level in drug abuse prevention and treatment and in the promotion of access to medication in such areas as palliative care, for example. For this, they should be commended.

The Board endeavours to meet NGO representatives in all the countries it visits so that it can engage in an extensive exchange of views with civil society in order to identify more effectively difficulties arising in drug abuse prevention policies and the treatment of drug addicts.

With respect to the situation in Afghanistan, in 2000 INCB invoked article 14 of the 1961 Single Convention on Narcotic Drugs, as amended by the 1972 Protocol.

We are currently engaged in consultations with the Government of Afghanistan and a high-level Government delegation attended the Board's one hundred and third session in February this year.

The situation in Afghanistan remains worrying: progress in reducing illicit opium poppy cultivation remains slow and fragile; the country is today also one of the world's largest producers of cannabis resin; drug abuse continues to increase; and the level of opiate abuse is among the highest in the world.

The Government of Afghanistan has the primary responsibility for implementing the drug control conventions in its territory. INCB urges the Government to take the measures required to bring about a sustainable improvement in the drug problem, particularly the illicit cultivation of opium poppy and cannabis in Afghanistan.

INCB hopes that the greater capacity of the Afghan National Police, and the Counter-Narcotics Police will have a more significant impact in this regard than it has had over the past few years.

At the Paris Pact Ministerial Conference held in Vienna earlier this year, we noted the commitment shown by the Afghan Government to stemming the illicit flow of opiates from Afghanistan. We sincerely hope that these efforts will be sustained and that they will have tangible results.

We also note the significant commitment made by the international community at the recent conference in Japan and call on the Afghan Government and its international partners to continue paying due attention to drug control and the fight against corruption.

Without progress in this area, reconstruction and development will remain fragile, if not impossible.

Mr. President, Excellencies, Ladies and Gentlemen,

At the more technical level, INCB works with Governments, in the context of the system of forecasts, assessments and statistics established by the three United Nations conventions for whose full implementation we are responsible, to facilitate the licit trade in narcotic drugs and psychotropic substances and, above all, to ensure their availability for health, medical and scientific uses.

As for chemical precursor products, we are involved in monitoring international transactions to prevent their diversion from licit trade to the manufacture of illicit drugs.

We note that wide disparities remain in the levels of the licit consumption of narcotic drugs and psychotropic substances.

In some countries and regions, consumption is very low, while in others overconsumption is already a serious health concern or is becoming so.

In 2010, for example, morphine use in the United States of America, which contains 5 per cent of the world population, accounted for 55 per cent of global consumption, while overall oxycodone use accounted for 80 per cent and fentanyl use 37 per cent of global licit consumption.

At the opposite end of the scale, about 80 per cent of the world population has extremely limited access to the opioids required for medical purposes to relieve patients' pain.

At the same time, the abuse of prescription medicines, including analgesics such as oxycodone, has become the most worrying aspect of drug dependency in the United States. The same phenomenon is growing in many other countries.

Our data on global supply and demand indicate that global supplies of opiate raw materials are more than adequate to meet medical requirements, as is global manufacturing capacity.

INCB drew international attention to this issue in the supplement to its Annual Report for 2010. It calls for continued and further implementation of the recommendations contained in the supplement and in Commission on Narcotic Drugs resolution 54/6, which was adopted last year with a view to ensuring the availability of such medicines in every country in the world.

In an investigation by INCB of the obstacles to the availability of opioids for medical purposes, the majority of Governments said that one obstacle related to the question of attitudes and awareness. They cited concerns about drug addiction among health professionals and patients and also inadequate training for health professionals, as principal factors contributing to the underutilization of opioids.

Overrestrictive laws and regulatory constraints are also often seen as important factors limiting the availability of internationally controlled analgesic substances.

In order to improve the supply of such substances for medical purposes, the first step is to make a precise assessment of national requirements.

To this end, in March 2012 INCB, together with the World Health Organization, launched a guide for national authorities on assessing their requirements. This guide has been distributed to all Governments and is available on the INCB web page. I urge you to consult the guide and to commend its usefulness to your competent national authorities.

Mr. President, Excellencies,

One achievement of international drug control has been to prevent the large-scale diversion of controlled substances from international trade.

However, INCB is concerned that the diversion of some narcotic drugs and psychotropic substances, often in the form of pharmaceutical preparations, from licit channels at the national level has become a major source of supply for illicit markets.

The international system on monitoring such medicines or precursors may seem to be functioning satisfactorily, but it remains essential that every country should exercise effective controls within its borders to prevent diversion of drugs to the illicit international trade.

INCB has been working with the United Nations Office on Drugs and Crime (UNODC) on the development of an electronic import and export authorization system. The system would facilitate the licit trade in internationally controlled substances while preventing diversion and would ensure the security of the electronic exchange of import and export authorizations between countries.

It would also expedite the work of national authorities and reduce the risk of forged paper-based authorizations.

Importantly, it could contribute to the increased availability of narcotic drugs and psychotropic substances for medical and scientific use.

The initiative was welcomed by the Commission on Narcotic Drugs in its resolution 55/6, which invited Member States and other donors to provide extrabudgetary contributions for this purpose. I would encourage all of you to give this matter consideration.

New technologies can facilitate drug control, but they can also be misused. Illegal Internet pharmacies continue to sell internationally controlled substances and are increasingly marketing their websites through social networking sites.

This poses major health risks: substances purchased in this manner may be counterfeit or substandard and, sold without proper medical supervision, are liable to be abused. INCB has urged Governments and the private sector to continue to take action against such illegal Internet pharmacies. They should also raise awareness among the general public of the risks of purchasing medicines from illegal Internet pharmacies and inform the Board of measures they have taken in this regard.

Mr. President, Excellencies,

Our annual reports highlight achievements in drug control but also weaknesses in drug control systems.

For our analysis, we rely upon detailed information supplied by Governments and that contained in reports by regional and international organizations.

The global drug situation is complex and multifaceted. [However, one thing is clear: while much progress has been made in the past century of international drug control, a great deal remains to be done.] Permit me to give you a brief account of the challenges we face.

Sixty per cent of global cocaine seizures now occur in South America, while the United States remains the world's largest market for cocaine.

Drug trafficking in Central America and the Caribbean continues to pose a grave threat to regional security. Cocaine trafficking through West Africa is affecting public health in the region, inasmuch as there are increasing levels of cocaine abuse in some of the countries affected.

Cocaine trafficking routes to Europe have diversified, with increased trafficking through North Africa and South-Eastern and Eastern Europe.

Trafficking of cocaine to Australia is also of increasing concern.

In Western Asia, trafficking in and abuse of amphetamine-type stimulants and cocaine is increasing, and the illicit production of opium poppy increased by 60 per cent from 2010 to 2011. Illicit opium poppy cultivation and opium production are continuing to increase in East and South-East Asia.

A new concern is the abuse of prescription drugs. This is a growing problem in North America and South Asia.

Mr. President, Excellencies,

Drug control must comprise both demand and supply reduction efforts.

Primary prevention, treatment and rehabilitation are all key to lowering demand.

The public have a right to be protected from drug abuse and dependency, and in this connection I note that the ever-growing range of synthetic drugs and new and more dangerous forms of cannabis constitute a threat emphasized by many Governments.

Legalization would not solve the symptoms and causes of the problem. INCB devoted a section of its Annual Report to this subject as long ago as 1992. What we said then is equally valid today.

INCB emphasizes now, as it did then, that legalization will not resolve the problem. All it will do is to undermine prevention campaigns and so exacerbate the abuse of new drugs and violence. Organized crime and the black market will target new potential young consumers.

Moreover, legalization would violate the treaties to which you have all acceded.

In that connection, I urge you to make an honest assessment of the quality of your national prevention policies.

Above all, to address the drug problem, States should redouble their demand reduction efforts.

Mr. President, Excellencies, Ladies and Gentlemen,

Another factor that our report draws to your attention is that the control of precursors, chemicals used in the illicit manufacture of drugs, is crucial to reducing supply.

The 1988 United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances is a vital tool in this regard.

Our report on precursor chemicals includes a new thematic chapter reviewing the past two decades of international precursor control. Key to preventing diversion of precursor chemicals is the active and sustained use by Governments of the Pre-Export Notification (PEN) Online system developed by INCB.

In 2011, international cooperation resulted in more than 250 seizures of controlled chemicals, representing more than 240 tons and thousands of litres of substances that would otherwise have been used in the illicit production of many millions of doses of drugs of abuse.

It has become more difficult for traffickers to divert precursor chemicals from international trade, which is excellent news.

However, diversion from domestic trade and the use of non-scheduled substances as substitutes for controlled precursors now represent the main source of precursors for illicit drug production.

To counter this, States need to remain vigilant with regard to trade in and diversion of precursors within their own borders and with regard to new manufacturing methods.

Precursor control is an essential element in addressing the production of heroin in Afghanistan. INCB calls on the Government of Afghanistan and the international community to take appropriate measures to ensure the implementation of Security Council resolution 1817 (2008).

The enhancement of systems for the collection and analysis of information on seizures of precursor chemicals is crucial for the identification and interdiction of trafficked chemicals.

The established Project Cohesion mechanisms coordinated by INCB provide a valuable platform for the exchange of such information, which should be used by Governments and regional and international bodies in and around Afghanistan.

Mr. President, Excellencies, Ladies and Gentlemen,

Governments, the international community and civil society have much work ahead of them. We have in place a comprehensive framework for action — the international drug control system, built upon the three international drug control conventions.

The achievements of the past 100 years of global drug control show what can be achieved with political will and international cooperation. A century of international drug control has proved the importance of properly functioning national drug control systems, at the heart of which are effective national drug regulatory authorities.

These authorities are responsible for the day-to-day work of ensuring the availability of medicines and preventing the diversion of internationally controlled substances.

Often under-resourced or inadequately trained, national drug regulatory agencies are nonetheless the bedrock of international drug control.

At the General Assembly Thematic Debate on Drugs and Crime as a Threat to Development, held on 26 June, I emphasized the supreme need to incorporate regulatory drug control, and the building of the capacity of national authorities responsible for regulating medicines and precursors, into development programmes.

Similarly, I would like to emphasize today the need to support the efforts of these countries, which are seeking to keep a more effective control over their requirements, their use, their production and their imports of substances covered by the United Nations Conventions.

In particular, I would like to call on donor countries to support such activities promoted by INCB and UNODC.

All Governments must make every effort to ensure that national administrations promoting public health are provided with sufficient capacity and resources.

Mr. President, Excellencies, Ladies and Gentlemen,

I have highlighted for you today a few of the issues raised in the INCB annual reports. Allow me to refer you to the INCB website (www.incb.org), where all of our reports and guides are available.

In closing, I thank the Governments for their cooperation with INCB, which enables us to fulfil our mandate on the implementation of the treaties, and congratulate them on their efforts in the area of drug control. At the same time, I would encourage them to do a bit better.

As we move into the next 100 years of international drug control, which began in 1912, INCB urges States to redouble their efforts to address the drug problem, both domestically and globally, in accordance with the international drug control conventions and in the spirit of shared responsibility, both of which lie at the heart of the international drug control system.

Thank you for your attention.