

Annex III

Statement made by Hamid Ghodse, President of the International Narcotics Control Board, on 26 February 2009 at the event marking the centennial of the convening of the International Opium Commission in Shanghai, China

At the outset, allow me to thank the Government of China for organizing and hosting this magnificent event. It is a unique privilege for me to speak before this august gathering convened to mark 100 years of multilateral drug control. The International Narcotics Control Board and the Government of China have long historical ties and a record of excellent cooperation.

The international community has come a long way since the International Opium Commission met in February 1909 in this beautiful city of Shanghai, which, at the time, was the main importation point of opium into China.

The situation faced by the 13 nations represented in the Shanghai Commission was extremely difficult. The demand for opium, morphine and other highly addictive substances was high and since these substances were unregulated, addiction problems had started to develop, not only in China but also in other countries of the world. Delegates to the Shanghai Commission were aware of the wider geographical scope of the drug problem and the nascent addiction of manufactured opiates.

On the other hand, the opium trade was very lucrative, bringing in millions of dollars. The value of Indian opium exported to China, for example, is said to have amounted to 3 million pounds sterling in 1907. Such enormous sums provided a livelihood for a large number of ordinary people. It is therefore all the more remarkable that the International Opium Commission took the daring step of putting public health issues above commercial interests and decided to call for a global effort to regulate drugs in order to protect the health of the people.

The Shanghai Declaration, which was adopted at the Commission, was historic in many ways. For the first time, a community of nations agreed that the non-medical use of opium should be a matter for careful regulation, or even prohibition. For the first time, the international community expressed the fact that certain drugs could be dangerous. The Commission agreed that the unrestricted manufacture, sale and distribution of morphine constituted a grave danger and called on Governments to make efforts to control it. And, for the first time, the efforts by the Government of China to eradicate the production and consumption of opium throughout its empire received unanimous international recognition.

The Shanghai Declaration was thus the first pronouncement of the international community's intensity to act against the growing drug problem. And although the Commission was never intended to establish binding obligations, it nevertheless accelerated the efforts that, only three years later, led to the Hague Opium Convention of 1912, which established control of narcotic drugs as an institution of international law on a multilateral basis.

Like many great ideas, international drug control was achieved gradually over a long period of time. The conferences of Shanghai and the Hague were followed by a series of multilateral agreements that addressed the cultivation, manufacture, trafficking and abuse of opium and other narcotic drugs. The efforts of the international community culminated in the international drug control treaties that are the current framework for action in international drug control today: the Single Convention on Narcotic Drugs of 1954, the Convention on Psychotropic Substances of 1971 and the United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances of 1988. Even decades after their adoption, these treaties enjoy the overwhelming support of the international community. More than 90 per cent of Member States, representing 99 per cent of the world's population, have agreed to be bound by their provisions.

One hundred years is a very respectable period and enough time has elapsed to demonstrate the value of our institutions. The international drug control institutions have proven their worth. The licit control system established by the international drug control treaties has expanded from when it was first created, managing an ever-increasing number of substances and a continuously rising demand for drugs needed for medical and scientific purposes.

In spite of these great efforts and successes, challenges remain to be addressed by the international community. One is the underutilization of narcotic drugs for medical purposes. In line with its mandate, the Board has consistently highlighted this issue, urging Governments to critically examine their methods of assessing domestic medical needs for opiates and to take the steps necessary to remove impediments to the adequate availability of those drugs for medical and scientific purposes. This has not been without effect. A review of trends in global consumption of opiates and synthetic opioids for the 20-year period 1988-2007 indicates that the consumption of opiates has increased steadily, almost tripling since 1987. The consumption of synthetic opioids almost quadrupled during the same period.

Nevertheless, access to these drugs is far from global. According to the World Health Organization, as many as 86 million people may still experience unnecessary suffering due to lack of adequate drugs. Together with WHO, the Board has therefore examined the reasons for the lack of availability. As a result, the WHO Access to Controlled Medications Programme has been developed, which assists Governments in their efforts to improve the availability of drugs for medical purposes. The Board encourages all Governments to make use of that programme.

Governments must also seriously address the question of demand reduction. The international drug control system has made an important contribution to reducing the demand for drugs worldwide. The amount of opiates abused in China alone at the beginning of the twentieth century is estimated at more than 3,000 tons in morphine equivalent. In comparison, the amount of opiates illicitly used worldwide each year is currently estimated at about 400 tons in morphine equivalent. Nevertheless, drug abuse is a problem in most countries in the world and vigorous action must be taken to counter it.

In its annual report for 1993, the Board called for decisive action to reduce the demand for drugs and urged Governments to give a higher priority to that issue. To

achieve a lasting reduction of drug abuse, demand reduction programmes have to have a long-term view and must be sustainable and be adequately funded.

Drug abuse prevention programmes should receive the attention they deserve. The Board has emphasized for many years that Governments must seriously address the problem, heeding the adage that “an ounce of prevention is worth a pound of cure”. Compared with the cost of treating and rehabilitating drug abusers, the cost of implementing measures aimed at preventing first use of drugs is minute.

It is also essential that, in devising drug abuse prevention programmes, the causes generating illicit demand for drugs should be analysed and the necessary measures identified to address the problem of drug abuse at its roots. Special attention should be given to the social causes underlying the drug problem, which should be adequately addressed by social policies. Successful prevention programmes are often the result of long-term investment and dedicated programmes that teach young people and other vulnerable groups the skills they need to resist non-medical drug use. If a substantial change in attitudes can be achieved, success in drug abuse prevention will not be far behind.

Successive technological revolutions have changed our world to such an extent that it would probably be hardly recognizable to the delegates that participated in the International Opium Commission in 1909. These developments have been beneficial to many but have also brought opportunities for drug traffickers. The deregulation and liberalization of commercial practices in the licit drug market has tended to weaken the regulatory power of Governments. Drug trafficking organizations can design and manufacture psychoactive substances with the explicit aim of bypassing the restriction imposed by international drug control regulations and then distribute those drugs outside the control system. The Internet can be misused to become a worldwide Web for trafficking in internationally controlled substances and drugs. The Board is convinced that a global coordinated response is needed to address these challenges and encourages Governments to support multilateral initiatives.

These are important challenges. Governments and the international community as a whole have to find a way to tackle them, bearing in mind the principles of shared responsibility, the sovereignty of nations, the territorial integrity of States and the need to address the world drug problem in a balanced and integrated manner. But while these challenges are significant, they are dwarfed by the enormous problems that the world faced at the time of the Shanghai Opium Commission.

Over the past 100 years, the commitment of the international community to international drug control has not wavered. All this time, Governments and intergovernmental and non-governmental organizations have worked together to examine how the international drug control system can be further improved.

A high-level segment of the Commission on Narcotic Drugs will be held in Vienna in March 2009 to review the progress made since the 1998 special segment of the General Assembly, on countering the world drug problem, and to adopt a political declaration that will chart the future course of international drug control.

Both this meeting in Shanghai and the meeting in Vienna are ideal opportunities for the international community to renew its commitment to the spirit

of the 1909 Shanghai Commission and the multilateral agreements that followed it. The conventions continue to be highly relevant in the face of contemporary problems and challenges and may in fact be more necessary now than in the past. And while the international drug control system is not perfect, it has stood the test of time with credit.

In 1909, the Chairman of the Commission concluded his opening statement by saying that “much still needs to be done by our respective Governments and the nations we represent. As we move out to meet our responsibility, the appeal of one of the world’s more recent heroes comes to us — let us have faith that right makes might, and in that faith let us to the end dare to do our duty as we understand it.” I echo those sentiments wholeheartedly and look forward to working with all Governments on a new Shanghai Declaration that will embody a similar spirit and commitment.