The drafters of the Single Convention on Narcotic Drugs of 1961\(^1\) made it clear in the preamble that the main concern of the parties was the health and welfare of humankind. Together with that fundamental assertion was the recognition of the medical use of narcotic drugs and of their indispensable role in the relief of pain, for which countries needed to ensure their availability and make adequate provision. Those principles were reaffirmed in the Convention on Psychotropic Substances of 1971,\(^2\) in which it was added that it is necessary to restrict the use of psychotropic substances to legitimate purposes and that the availability of such substances for medical and scientific purposes should not be unduly restricted.

Almost 60 years later, the 1961 Convention has been ratified by 187 countries and the 1971 Convention has been ratified by 184 countries. However, the goal of ensuring the availability of and access to narcotic drugs and psychotropic substances for medical and scientific purposes is still far from being universally met. People are still suffering; such people range from those who have to undergo surgery without anaesthesia to those without access to the medication they need and those who are dying in unnecessary pain. The imbalance in the availability of and access to opioid analgesics is particularly troublesome: the Board wishes to raise the alarm and a call to action, as data show that many of the conditions requiring pain management, including cancer, are prevalent, and that their prevalence is increasing in low- and middle-income countries,\(^3\) while the medicines and knowledge to alleviate the situation exist and are affordable.

Pain relief and pain management are needed for the treatment of many health conditions. In several regions of the world, pain relief drugs are not commonly prescribed. Internationally controlled substances such as methadone and buprenorphine can also be used in the management of drug dependence; notwithstanding their proven effectiveness in this field, their use is limited in some countries, including where there are significant prevalence levels of opioid dependence.

While the lack of access to opioid analgesics has been the focus of much attention, the data related to the availability of and access to psychotropic substances also show considerable disparities among countries and regions of the world. In addition to the inadequate availability of and poor access to necessary medical treatments in some regions, recent studies on the use of benzodiazepines in some countries also point to an oversupply of such substances relative to medical needs, contributing to heightened risks of diversion and giving rise to significant challenges to their control.

The importance of making internationally controlled substances available and accessible for medical and scientific purposes was most recently reaffirmed in the outcome document of the special session of the General Assembly on the world drug problem held in 2016.\(^4\) This reaffirmation amplified the calls for action contained in the 2009 Political Declaration and Plan of Action on International Cooperation Towards an Integrated and Balanced Strategy to Counter the World Drug Problem\(^5\) and in the Joint Ministerial Statement of the 2014 high-level review by the Commission on Narcotic Drugs of the Implementation by Member States of the Political Declaration and Plan of Action.\(^6\)

Ensuring the availability and accessibility of controlled substances was also called for by the Commission on Narcotic Drugs and the Economic Social Council in a number of their resolutions. In 2010 and 2011, the Commission on Narcotic Drugs adopted resolutions 53/4 and 54/6 with a view to promoting the adequate availability of internationally controlled substances for medical and scientific purposes while preventing their diversion and abuse.

The International Narcotics Control Board (INCB), in accordance with its mandate, has continuously called the attention of Governments to the need to ensure the adequate availability of and access

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\(^2\)Ibid., vol. 1019, No. 14956.


\(^4\)General Assembly resolution S-30/1, annex.


to internationally controlled substances for medical purposes, while at the same time preventing diversion and abuse. In 2016, INCB published a supplement to its annual report for 2015 entitled *Availability of Internationally Controlled Drugs: Ensuring Adequate Access for Medical and Scientific Purposes—Indispensable, Adequately Available and Not Unduly Restricted*.7

Based on the analysis and recommendations presented by INCB in the above-mentioned supplement, the international community recognized the seriousness of the situation and, at the special session of the General Assembly on the world drug problem held in 2016, Member States adopted the outcome document entitled “Our joint commitment to effectively addressing and countering the world drug problem”. It contains, for the first time in a document on the world drug problem, a whole section about access to internationally controlled substances for medical and scientific purposes, with specific operational recommendations.

Ensuring the adequate availability of and access to internationally controlled substances for medical and scientific purposes while preventing their abuse, diversion and trafficking are functions of the international drug control system as established by the international drug control conventions. The recommendations contained in the outcome document of the 2016 special session of the General Assembly and in the supplement to the INCB annual report for 2015 are to be translated into action at the national and international levels.

To assist Governments in doing so, INCB decided to review the implementation of the recommendations on the availability of and access to controlled substances contained in the outcome document and the supplement to the INCB annual report for 2015. To this end, INCB invited Member States to inform it about the action that they had taken. Responses were received from 130 States (representing 78 per cent of the world population) and analysed for the present report. At the invitation of INCB, contributions from some 30 civil society organizations were received and were considered in the preparation of the report.

The recommendations contained in the outcome document and the supplement to the INCB annual report for 2015 are also in support of the Sustainable Development Goals. Among them, Goal 3 (Ensure healthy lives and promote well-being for all at all ages) includes target 3.8, which calls for achieving universal health coverage, including access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines for all. INCB stresses that not all people who are in need of treatment requiring the use of narcotic drugs and psychotropic substances, in particular in low- and middle-income countries, are receiving the treatment or medicines that can help alleviate their health conditions.

INCB calls upon Governments, international and regional organizations as well as civil society to work towards achieving Sustainable Development Goal 3 and its target 3.8 by redoubling efforts to ensure the adequate availability of, access to and rational use of internationally controlled narcotic drugs and psychotropic substances for medical and scientific purposes.

INCB offers Member States this review of progress in the implementation of the recommendations related to availability of and access to internationally controlled drugs for medical and scientific purposes. This review is intended to assist Governments in developing and implementing further measures to ensure the achievement of one of the fundamental goals of the international drug control conventions: the safe use and rational delivery of the best affordable medicines to those patients who need them, while preventing their diversion, misuse and abuse.

Viroj Sumyai
President
International Narcotics Control Board

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