

Chapter IV.

Recommendations to Governments, the United Nations and other relevant international and national organizations

791. Following its review of the implementation of the international drug control conventions, the Board would like to present to Governments and relevant international and regional organizations its main conclusions and recommendations as follows.

Improving drug use prevention and treatment services for young people

792. Article 38 of the 1961 Convention as amended underscores the importance of measures to prevent and treat drug dependence. In addition, the need to address drug dependence, in particular among young people, has been the subject of numerous resolutions and declarations of the Commission on Narcotic Drugs, the Economic and Social Council and the General Assembly in its special sessions on the world drug problem held in 1998 and 2016. Drug use and associated health consequences are greatest among young people, in particular those aged 18–25. Cannabis is a drug widely used by young people. Although many who initiate use of psychoactive substances later discontinue use, those who are most vulnerable because of physiological, social, emotional and developmental factors may progress to the use of multiple substances, as well as an increased frequency of use. Research shows that those who initiate substance use early are most at risk of becoming dependent.

793. Furthermore, primary prevention measures that protect people, in particular children and youth, from drug use are among the key operational objectives of the recommendations on drug demand reduction contained in the outcome document of the thirtieth special session of the General Assembly. There is also a fundamental protection aspect of the Convention on the Rights of the Child, as reflected in article 33 of that Convention. The *International*

Standards on Drug Use Prevention, published by UNODC in 2013 and later jointly revised by UNODC and WHO in 2018, summarize the scientific evidence on the effectiveness of drug use prevention efforts. They were followed by the *International Standards for the Treatment of Drug Use Disorders*, published by UNODC and WHO in 2017. In a number of documents and resolutions, including the outcome document of the thirtieth special session of the General Assembly, Governments have recognized those two sets of international standards as useful tools to promote evidence-based prevention and treatment. The Board would like to draw the attention of Governments to the importance of considering the scientific evidence summarized in those two sets of international standards when implementing programmes for the prevention of drug use and treatment of drug dependence among youth.

Recommendation 1: The Board urges all Governments to:

- (a) Develop national systems for the collection of data on drug use;
- (b) Develop capacity-building in the field of drug use prevention and treatment;
- (c) Implement evidence-based prevention programmes for young people using a wide range of interventions in the family, in school and in the community;
- (d) Promote early detection and interventions;
- (e) Implement multisectoral evidence-based prevention programmes not only for drug use but also for other problematic behaviours;
- (f) Implement specific interventions to prevent the progression to substance use disorders;
- (g) Promote evidence-based treatment programmes specifically tailored for young people, taking into consideration the recommendations on the treatment of drug dependence contained in chapter I of the annual report of the Board for 2017.

794. For additional recommendations and more details of proposed action, please refer to the section entitled “Implications for policy development worldwide: conclusions and recommendations”, contained in chapter I of the present report.

Cannabis

795. The Board notes with concern the legalization of cannabis for non-medical and non-scientific purposes in several jurisdictions and that other jurisdictions are considering taking similar action. The Board reiterates that the 1961 Convention as amended, the 1971 Convention and the 1988 Convention limit the use of all controlled substances to medical and scientific purposes.

796. The developments in a few countries that have legalized or permitted the use of cannabis for non-medical purposes or that have tolerated its legalization at the sub-national level are undermining the universal adherence to the three international drug control conventions and the commitment to their goals and objectives, as was reaffirmed by Member States at the thirtieth special session of the General Assembly on the world drug problem, held in 2016, and as expressed in the 2019 Ministerial Declaration on Strengthening Our Actions at the National, Regional and International Levels to Accelerate the Implementation of Our Joint Commitments to Address and Counter the World Drug Problem.

Recommendation 2: Recalling the health and welfare objectives of the three international drug control conventions, the Board reiterates that the conventions limit the use of controlled narcotic drugs and psychotropic substances, of which cannabis is one, exclusively to medical and scientific purposes. The Board calls upon the Governments of countries in which the use of cannabis or cannabis derivatives for non-medical purposes has been permitted, nationally or at the subnational level, to take steps to bring the entirety of their territories back into compliance with the legal obligations incumbent upon States parties to the international drug control conventions.

797. Over the past several years, some States parties have taken steps to control and regulate the sale of cannabis for neither medical nor scientific purposes. The Board’s review of this issue of convention compliance has included engagement with individual States parties, statements in inter-governmental forums, and publication of the Board’s views in its annual reports. At all times, the Board has endeavoured to fulfil its mandate, as expressed in the three international drug control conventions, including under

article 9, paragraphs 4 and 5, of the 1961 Convention as amended. In particular, consistent with article 9, the Board has sought to facilitate effective national action to attain the aims of the 1961 Convention and to limit the cultivation, production, manufacture and use of drugs to an adequate amount required for medical and scientific purposes, ensure their availability for such purposes and prevent the illicit cultivation, production and manufacture of, illicit trafficking in and use of drugs.

798. Responding to changes in the regulation of cannabis in some countries, the Board has engaged with States parties individually, considering their specific circumstances, and has reflected on the individual approaches and programmes of each State party. Notwithstanding the variations in each State party’s approach to cannabis, the Board has identified inconsistencies in their compliance with their obligations under the Conventions. As a result of this ongoing dialogue on the topic of cannabis regulation, the Board takes note of significant risks to the abilities of individual States parties to implement certain elements of their Convention obligations.

Recommendation 3: The Board therefore takes the opportunity of this annual report to draw the attention of the Commission on Narcotic Drugs to the need to address this issue, consistent with the three international drug control conventions and taking into account the outcome document of the thirtieth special session of the General Assembly, on the world drug problem, entitled “Our joint commitment to effectively addressing and countering the world drug problem”, and the 2019 Ministerial Declaration on Strengthening Our Actions at the National, Regional and International Levels to Accelerate the Implementation of Our Joint Commitments to Address and Counter the World Drug Problem.

International drug control conventions and human rights

799. The fundamental goal of the international drug control conventions, to safeguard the health and welfare of humanity, includes the full enjoyment of human rights. State actions that violate human rights in the name of drug control policy are inconsistent with the international drug control conventions. Extrajudicial responses to suspected drug-related activities cannot be justified under international law, including under the international drug control conventions.

800. In addressing suspected drug-related crime, States should be proportionate in their responses and in their treatment of suspected offenders. According to the

principle of proportionality, the penalties handed down should reflect the gravity of the offence and the degree of responsibility of the suspected offender. In cases of lesser gravity, or in which the alleged crime has been committed by a person who uses drugs, States are not legally required by the international drug control conventions to impose criminal sanctions, including imprisonment, but may provide for treatment and rehabilitation measures as an alternative to conviction or punishment, or in addition thereto.

Recommendation 4: The Board appeals to all States parties to pursue drug control policies that respect and protect all human rights and are consistent with international human rights instruments. Drug abuse and drug-related activities cannot be lawfully addressed without ensuring the protection of human rights and compliance with the international drug control conventions.

Recommendation 5: The Board reiterates that in addressing drug-related criminality, States must continue to apply the principle of proportionality as a guiding principle in the determination and application of criminal sanctions.

Recommendation 6: Although the determination of sanctions applicable to drug-related crime remains the prerogative of States parties to the conventions, the Board reiterates its position on the issue of capital punishment for drug-related offences and urges States that retain capital punishment for drug-related offences to consider the abolition of the death penalty for that category of offence.

Recommendation 7: The Board recalls that States parties to the conventions are required to give special attention to and take all practicable measures for the prevention, treatment, rehabilitation and social reintegration of persons affected by drug use disorders. The Board reiterates that respecting the right of people affected by drug use disorders to health and treatment services will contribute to reducing the stigma and discrimination associated with those disorders.

Universal adherence to the international drug control conventions

801. The three international drug control conventions embody the international consensus on requirements for the control of licit trade in narcotic drugs, psychotropic substances and precursor chemicals that can be diverted, and on the measures needed to facilitate access to and the availability of controlled substances for legitimate

medical and scientific purposes. By becoming parties to the conventions, States demonstrate their common and shared responsibility for meeting those minimum requirements with a view to achieving the aim of the conventions, which is the health and welfare of humankind.

Recommendation 8: The Board reiterates that universal ratification of the drug control conventions is imperative for strengthening the international licit drug control framework and for ensuring that traffickers do not target non-parties due to actual or perceived weaknesses in the scope of control of scheduled substances. Accordingly, the Board urges all States that have not yet become parties to one or more of these instruments to do so without delay and to take steps to ensure their full implementation within their national legal orders.

Reducing the adverse public health and social consequences of drug abuse

802. An area in which the implementation of the international drug control conventions has not been fully realized is the provision of prevention and treatment. The relevant provisions of the conventions do not mandate a specific approach, instead leaving it to States to determine which approaches are most suitable to their national circumstances. The lack of epidemiological data remains a barrier to the elaboration of evidence-based drug policy to support the development, formulation and provision of targeted and effective prevention and treatment interventions and to the optimization of resource utilization. In many parts of the world, prevention initiatives are inexistent or lacking, and the provision of treatment services is inadequate, while there are only insufficient mechanisms to combat stigma and foster social reintegration.

803. The health and welfare of humankind is the cornerstone of the international drug control framework and includes ensuring that persons affected by drug use disorders receive services that are evidence-based to treat drug use and potential related harms.

Recommendation 9: The Board notes that measures aimed at minimizing the adverse public health and social consequences of drug abuse, when they are based on scientific data, can help manage the pervasive effects and complex risks of epidemic-level drug abuse. As they form part of a strategy for comprehensive drug demand reduction, States parties are encouraged to implement measures that can minimize the adverse public health and social consequences of drug abuse, including through appropriate medication-assisted therapy programmes.

Availability and access to narcotic drugs and psychotropic substances

804. The cultivation of opium poppy for the production of opium and opiate raw material is a matter of major international importance in the context of drug control and public health. While recognizing the challenge posed by existing disparities in access to opioid analgesics, for several years the amount of opiate raw material available globally for the manufacture of narcotic drugs for medical purposes, including for pain management, has been more than sufficient to satisfy the current and anticipated levels of global demand as estimated by Governments, because both production and stocks are continuing to increase.

805. At the same time, the lack of access to and availability of controlled narcotic drugs and psychotropic substances for legitimate medical use continues to be a pressing public health problem in many regions of the world. In the 20-year period 1997–2016, the manufacture of morphine increased considerably, but of the total amount of morphine utilized globally, the majority (88 per cent, on average) was converted into codeine or into substances not covered by the 1961 Convention. Most of the codeine converted from morphine (89 per cent) was used to manufacture cough medication. The limited use of morphine and the difficulties in procuring it for pain management and relief are also related to the marketing of more expensive synthetic opioids that are used for the same indications as are opiates. Since 1997, the overall availability of opioid analgesics for consumption has more than tripled.

Recommendation 10: The Board recommends that all States parties prevent the accumulation of stocks of poppy straw in excess of the quantities required for the normal conduct of business, taking into account the prevailing market conditions.

Recommendation 11: The Board recalls that the 1961 Convention sets out a number of mandatory control measures for the licit cultivation of opium poppy and the production of opiate raw materials in order to ensure that they are limited to use for licit medical and scientific purposes. Therefore, the Board urges countries that are considering or are intending to commence the licit cultivation of opium poppy for medical and scientific purposes to consider the importance of the principle of non-proliferation. This objective is emphasized in the relevant resolutions of the Economic and Social Council and the Commission on Narcotic Drugs on the supply of and demand for opiates, in which the Council and the Commission urged all Governments to cooperate in preventing the proliferation of sources of production of

opiate raw materials and urged all Governments of countries in which opium poppy was not being cultivated for the licit production of opiate raw materials to refrain, in the spirit of collective responsibility, from engaging in the commercial cultivation of opium poppy.

Recommendation 12: The Board urges countries to develop mechanisms to ensure that the pharmaceutical industry produces and makes available medicines containing controlled substances, such as opioid analgesics, specifically morphine, that are affordable, and enforce the regulation of the pharmaceutical industry to deal with promotional and informational campaigns for prescribing and using high-cost formulations, including with respect to costly synthetic opioids.

806. Article 3 of the 1971 Convention allows countries to exempt certain preparations containing psychotropic substances from some measures of control. Such exemptions allow countries to facilitate easier access to some medicines containing internationally controlled psychotropic substances. However, the Board notes that in some jurisdictions that have chosen to exempt preparations containing psychotropics from some measures of control, certain provisions of article 3 are not correctly or fully implemented.

Recommendation 13: The Board calls upon Governments to ensure that all aspects of article 3 of the 1971 Convention are correctly implemented if they wish to exempt a preparation from certain measures of control. The Board would also like to remind countries that they are still obligated to uphold certain measures of control even in cases where a preparation has been exempted, such as the requirement to report annual data and apply provisions relating to international trade.

807. Diversion from licit domestic channels remains a major source of psychotropic substances used for illicit purposes; however, the Board continues to receive from Governments only a limited number of reports on their interdiction efforts. In addition, the Board stresses that while diversions from international trade are rare, Governments should remain vigilant to attempts by traffickers to divert psychotropic substances from the licit international market.

Recommendation 14: The Board encourages all Governments to provide to the Board regular and timely reports on diversions or attempted diversions of psychotropic substances from licit trade.

808. The Board notes with appreciation that an increasing number of countries have been submitting data on

the consumption of psychotropic substances, pursuant to Commission on Narcotic Drugs resolution 54/6. Aware of the difficulties faced by some Governments in this regard, the Board is prepared to assist Governments in finding the most appropriate method of collecting such data, as a first step towards assessing their availability.

Recommendation 15: The Board calls upon all Governments to report on the consumption of psychotropic substances on an annual basis, given the essential role that reported data plays in the monitoring and evaluation of the availability of psychotropic substances for medical and scientific purposes.

Precursor chemicals

809. The proliferation of non-scheduled chemicals, including “designer precursors”, with no known legitimate use remains an issue of concern (an in-depth analysis of recent trends and developments can be found in the Board’s report on the implementation of article 12 of the 1988 Convention). Often, these chemicals are available through online vendors and trading platforms. To assist Governments in preventing such chemicals from reaching illicit laboratories, the Board, in 2019, conducted a number of awareness-raising activities both at the sessions of the Commission on Narcotic Drugs and directly with Governments. It has also updated the limited international special surveillance list of non-scheduled chemicals to expand the concept of extended (“generic”) definitions for precursors and highlight those chemicals which do not have any known legitimate uses.

Recommendation 16: The Board calls on Governments to continue to identify approaches to proactively address the proliferation of non-scheduled chemicals used in illicit drug manufacture. To that end, Governments could explore ways and means of addressing series of chemical relatives and chemicals with no known legitimate uses and of facilitating the prosecution of relevant criminal cases. The Board encourages Governments to share successful national approaches and actively engage relevant sectors of industry, as well as enforcing applicable regulations to prevent the misuse of the Internet for the diversion of non-scheduled chemicals into illicit channels. At a minimum, Governments should cooperate with each other and with INCB by generating and sharing actionable intelligence for use in further investigations.

810. The Board has previously expressed concern about the risk that drug trafficking organizations might exploit the lack of effective government control over certain territories in order to divert precursors. Other risks to

effective precursor control identified by the Board include the competing incentives and interests of different national authorities, bureaucracy and an inadequate capacity to enforce existing legislation and regulations. The Board has also observed that competent national authorities, in the absence of clear national regulations, sometimes face difficulties in objecting to transactions even when those transactions are suspicious.

Recommendation 17: The Board calls on Governments to review their domestic control mechanisms with a view to ensuring that manufacture, distribution and end uses of precursors are adequately monitored and that all diversions and attempted diversions are investigated to prevent future diversions using similar *modi operandi*. The Board also calls on Governments of exporting countries to remain vigilant and suspend exports until doubts about their legitimacy have been dispelled.

Article 13 of the United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances of 1988

811. The clandestine manufacture of narcotic drugs, psychotropic substances, new psychoactive substances and precursors is not possible without the input of chemicals, materials and equipment. While the control of chemicals has long been a focus of authorities worldwide pursuant to the provisions of article 12 of the 1988 Convention, much less attention has been given to equipment and materials and article 13 of the Convention, which provides a basis for international action and cooperation in such control efforts. To address the issue, in November 2019 the Board approved a set of guidelines for Governments wishing to embark on activities in the context of article 13.

Recommendation 18: The Board encourages Governments to increase the operational use of article 13 of the 1988 Convention and take appropriate measures to prevent and investigate the diversion of equipment essential for the illicit manufacture of drugs and precursors.

Abuse of codeine-based cough syrups

812. The Board has previously recognized that cough syrups containing narcotic drugs, including codeine, are an effective medication for patients and an important part of many health systems. However, their abuse continues to pose a challenge in several jurisdictions.

Recommendation 19: The Board calls on Governments that are affected by the abuse of preparations containing codeine in their jurisdictions to consider the introduction of stricter control measures on such preparations as provided in the 1961 Convention as amended and to implement appropriate prevention and treatment interventions to address this challenge.

Non-medical use of opioids

813. While non-medical use of synthetic opioids has been reported at an unprecedented scale globally, the crisis manifests itself in different forms from region to region and involves both internationally scheduled substances such as fentanyl (and fentanyl analogues) and internationally non-scheduled substances such as tramadol. An estimated 66 per cent of the steadily increasing number of estimated global drug overdose deaths are related to opioids, and the overprescription of pharmaceutical opioids, as well as their illicit manufacture, has exacerbated the problem.

Recommendation 20: The Board calls upon all States to carefully review their prescription practices related to pharmaceutical opioids and to be vigilant about the increasing non-medical use of such substances in many regions. The Board also emphasizes the need for increased efforts to reduce trafficking in synthetic opioids and invites Governments to make full use of existing mechanisms and tools facilitating the prompt and secure sharing of information in this regard, in particular the IONICS system.

Electronic tools and training

814. The Board recognizes the efforts of Governments that have implemented I2ES and the advantages it offers to national authorities by significantly alleviating the administrative burden of the import and export administration process while also being a useful tool to help prevent the diversion of internationally controlled substances.

815. Having noted the challenges faced by some Governments in the further implementation of I2ES, the Board, through its secretariat, will continue to reach out and assist Governments in overcoming barriers such as know-how at the operational level and commitment to

using I2ES at the decision-making level in order to encourage the wider adoption of the system and greater user engagement.

Recommendation 21: The Board continues to encourage all Governments that have not yet done so to utilize the I2ES system and support its rapid implementation. The Board also invites existing users of the platform to share their experiences and expertise with other Governments and INCB with the aim of encouraging other countries to register for I2ES and actively use it. Finally, the Board urges Member States to consider the provision of extrabudgetary resources to scale up efforts to increase the rate of adoption and expand the functionalities of the platform.

Specific countries and regions

816. The abuse of tramadol, a synthetic opioid not under international control, and trafficking in falsified or illicitly manufactured tramadol continues to negatively affect countries in the Middle East and Africa. In many jurisdictions, tramadol-related abuse has been reported to be greater than that of internationally controlled drugs.

Recommendation 22: The Board calls upon States to recognize the importance of the exchange of information, coordination and cooperation among those countries affected by the diversion and abuse of tramadol and by trafficking in falsified and illicitly manufactured forms of the substance.

817. The lack of official information and data regarding trafficking in drugs, the prevalence rates of drug use and drug use prevention and treatment efforts in Africa and Oceania remain a concern for the Board. The lack of such information hinders efforts by the international community to fully assess the drug problem in those regions.

Recommendation 23: The Board calls upon all States to regularly provide to the Board and other relevant international organizations data on drug trafficking and drug use prevalence, as well as any information regarding legislation, policies or other efforts on drug use prevention, treatment, rehabilitation and social reintegration in their territories.

(Signed)
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