

317. The extrajudicial targeting of persons suspected of illicit drug-related activity is not only a breach of the three international drug control conventions, it also constitutes a serious breach of human rights, including due process norms as contained in the Universal Declaration of Human Rights and the International Covenant on Civil and Political Rights, and is an affront to the most basic standards of human dignity.

318. The Board wishes to reiterate, in the strongest possible terms, its categorical and unequivocal condemnation of those acts, wherever and whenever they may occur, and calls upon all Governments concerned to put an immediate stop to such actions and to publicly commit to and undertake investigations into any person suspected of having committed, participated in, aided and abetted, encouraged, counselled or incited any such extrajudicial actions, in full observance of due legal process and the rule of law, and their prosecution and sanction, as warranted.

2. Regulation of the use of cannabis for non-medical purposes

319. The Board notes the adoption or consideration by some States of measures affecting the legal control measures applicable to cannabis in order to allow the use of cannabis for non-medical purposes and the creation of a regulated market for the distribution and sale of cannabis products for non-medical use.

320. The Board wishes to reiterate that the 1961 Convention establishes, in its article 4 (“General obligations”), that the parties to the Convention are to take such legislative and administrative measures as may be necessary to give effect to and carry out the provisions of the Convention within their own territories and to limit exclusively to medical and scientific purposes the production, manufacture, export, import, distribution of, trade in and use and possession of drugs. As the Board has repeatedly emphasized, the limitation of the use of controlled substances to medical and scientific purposes is a fundamental principle that lies at the heart of the international legal framework for drug control and allows no exception.

321. The central role of the international drug control conventions was most recently reaffirmed by the States participating in the special session of the General Assembly on the world drug problem held in April 2016.

322. In examining measures taken by States with the aim of permitting and regulating the non-medical use of

cannabis, the Board has maintained a dialogue with the States concerned in which it has reaffirmed the incompatibility of such measures with the legal obligations incumbent upon States parties to the 1961 Convention, with a view to promoting compliance.

323. The Board wishes to remind all States that, in recognition of the public health risks associated with its abuse, cannabis has been subjected to the highest levels of control under the international drug control treaties through its inclusion in Schedules I and IV of the 1961 Convention. Schedule IV contains noxious substances that are particularly liable to abuse. Furthermore, dronabinol (*delta-9* tetrahydrocannabinol), the major active ingredient of cannabis, and other tetrahydrocannabinol (THC) isomers are classified as psychotropic substances under Schedules II and I, respectively, of the 1971 Convention.

324. While it is difficult to predict the effects of the legislative measures making cannabis available for non-medical use, it is certain that the abuse of cannabis potentially carries serious health consequences, as acknowledged by WHO. In recent years, States have reported a marked increase in the THC content of cannabis seized and an associated rise in health-related adverse reactions, evidenced by increases in hospital emergency room admissions. There have also been reported cases of children having ingested food products containing cannabis. Moreover, the rates of abuse may increase, especially among young people, because the legalization measures may affect perceptions of harm in that fewer people may perceive cannabis as being harmful, highlighting the need for enhanced prevention measures.

325. One of the central arguments advanced by proponents of the legalization of the use of cannabis for non-medical purposes is that the creation of a regulated licit market for cannabis intended for non-medical use would contribute to reducing drug trafficking by criminal networks. That argument fails to take into account the spillover effect that legalization may have in neighbouring jurisdictions where the use of cannabis for non-medical purposes remains illegal. Countries where legislative measures to permit and regulate the non-medical use of cannabis have been adopted or are being considered should also be aware of the risk that they will be targeted by criminal networks seeking to use them as transit countries for trafficking to other jurisdictions where the non-medical use of cannabis is not permitted.

326. In some States, the legalization of the use of cannabis for non-medical purposes has been justified by its proponents on the basis of the argument that the

criminalization of cannabis possession has led to the targeting of drug users belonging to minority groups and to their disproportionate representation in the criminal justice and prison systems. While the 1961 Convention does require States parties to adopt measures to ensure that possession of drugs is a punishable offence when committed intentionally, the conventions do not require the imposition of punishment or imprisonment for drug users and provide instead for the possibility for each State to impose treatment and rehabilitation measures either as an alternative to conviction or punishment or in addition thereto. **The Board encourages States affected by high rates of arrest and incarceration for minor drug-related offences committed by drug users to consider availing themselves of the possibility provided by the international drug control conventions to adopt non-punitive responses rather than permitting the use of cannabis for non-medical purposes, which may prove to be counterproductive.**

3. Importance of accurate and timely reporting

327. The effectiveness and efficiency of the international drug control system as established by the three international drug conventions depends on the accurate and timely reporting to the Board by Member States. Regrettably, many Governments fail to provide the Board with timely and adequate estimates and assessments and reliable statistical returns. Those sometimes include Governments of major manufacturing, importing and exporting countries; their lack of response has a significant impact on the ability of the Board to accurately monitor the world situation. Some Governments continue to experience difficulties in collecting the required information from their national and subnational stakeholders because of legislative or administrative shortcomings.

328. **Focusing first on narcotic drugs, the Board urges parties to provide accurate estimates and statistics on the stocks held by manufacturers and wholesalers. Information on stocks allows the balance between the supply of opiate raw materials and demand for opiates and the levels of accumulation to be monitored, as high levels may increase the risk of diversion. The Board urges Governments to ensure that their competent national authorities periodically obtain reliable information from private and State-owned manufacturers and wholesalers.**

329. Also relevant to narcotic drugs, many countries have been providing estimates to INCB that are much higher than the reported consumption. While strongly encouraging countries with inadequate and very

inadequate levels of consumption of controlled substances for medical and scientific purposes to ensure that consumption matches actual needs, the Board requests parties to provide estimates that realistically reflect their expected consumption. The Board encourages competent national authorities to refer to the *Guide on Estimating Requirements for Substances under International Control*, developed by INCB and WHO,⁵¹ when calculating their estimates, and reminds Governments that supplementary estimates may be sent to the Board at any time during the year.

330. Turning to psychotropic substances and the obligations set forth in the 1971 Convention, Governments are encouraged to fully implement Commission on Narcotic Drugs resolutions 53/4 and 54/6, and therefore to report data on the consumption of psychotropic substances (for medical and scientific purposes). The Board stresses the importance of providing appropriate assessments for psychotropic substances, as this would ensure their availability for the treatment of a large variety of medical conditions, including mental health conditions, and would improve access to them worldwide, while reducing the risk of diversion for illicit use. The reported assessments for all countries are published by INCB on a monthly basis and amendments may be sent to the Board at any time.

331. The estimates of annual legitimate requirements for the import of selected precursors of amphetamine-type stimulants are requested, on a voluntary basis, pursuant to Commission on Narcotic Drugs resolution 49/3, in order to provide the authorities of exporting countries with an indication of the needs of importing countries. Additionally, pursuant to article 12, paragraph 12, of the 1988 Convention, Governments are obliged to report annually to the Board information on seizures of substances listed in Tables I and II of the Convention and of substances not included in Tables I or II; as well as information on methods of diversion and illicit manufacture, stopped shipments and thefts involving those substances. Although the submission rate of data for 2015 was the highest in five years, the Board notes that not all States parties to the 1988 Convention provide such information in an accurate and timely manner. A considerable number of the submissions often do not include important details such as methods of diversion or information on stopped shipments or the illicit manufacture of substances, or are submitted to the Board with significant delays. This hampers the ability of the Board to identify and thoroughly assess worldwide trends in trafficking in precursors and in the illicit manufacture of drugs.

⁵¹Vienna, 2012.