

Chapter IV.

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

783. 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.

A hidden epidemic: the use of drugs among older persons

784. The emergence of increasing patterns of drug use and drug dependence among older persons is a phenomenon of increasing concern. Limited epidemiological data exist on the extent of substance use among older persons, even in countries in which regular drug use surveys are undertaken. Data collection on substance use has focused on the general population (15–65 years of age), young people, young adults and marginalized and at-risk groups; some groups, such as older persons, have been neglected in such data collection. The problem of substance use among older persons has only recently been recognized as such and specific studies have only recently started to be conducted.

785. The general lack of data on substance use among older persons translates into a lack of attention to the issue in the development of policies and programmes. The limited collection of scientific evidence makes it difficult to identify interventions and policies that have resulted in positive outcomes in terms of prevention, treatment and rehabilitation in relation to the use of drugs among older persons. In that regard, research and data collection, combating stigma associated with use of drugs among older persons, and the need for integrated, holistic and age-appropriate care should be addressed when

Governments develop and implement policies and programmes in this area.

Recommendation 1: The Board urges all Governments to:

- (a) Expand the age range of the population surveyed in epidemiological studies beyond 65 years and consider using innovative assistive health technologies or innovative ways for coordinating the treatment of, supporting and monitoring the outcomes for older persons who use drugs;
- (b) Establish or extend and improve existing prescription-monitoring systems that can help detect problems of overuse and related risks;
- (c) Use existing data from national health record systems, including on treatment demand, and undertake analysis and research in order to provide preliminary estimates of the scale of the prevalence of drug use, including the misuse of prescription medicines, among older persons;
- (d) Use existing evidence-based prevention strategies to prevent the stigmatization of older persons who use drugs and involve older persons in the development of messaging to combat stigma at the community level and in the development of and training for professionals working in the relevant support services;
- (e) Develop effective service responses and include older persons who use or have used drugs as part of the integrated care policy development process that is centred on the needs of individuals, their families and communities;
- (f) Expand or develop existing outreach services for people who use drugs as a point of entry to the continuum of integrated care for the most marginalized of older persons who use drugs;

- (g) Ensure that health services are able to screen older persons for drug use and ensure that these services and evidence-based programmes are culturally adapted for older persons from varying societies and backgrounds;
- (h) Ensure that any policies developed for older persons who use drugs are underpinned by the principles of independence, participation, care, self-fulfilment and dignity, as set out in the United Nations Principles for Older Persons, and should be developed using *Active Ageing: A Policy Framework* and the *Global Strategy and Action Plan on Ageing and Health*.

For additional recommendations and more details on proposed action, please refer to chapter I of the present report.

Non-medical use of cannabis

786. The Board reiterates its concern regarding the legalization of cannabis for non-medical and non-scientific purposes in several jurisdictions, with other jurisdictions considering 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.

787. 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 implementation, which was reaffirmed by Member States at the special session of the General Assembly on the world drug problem held in 2016 and 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: Noting that the 1961 Convention as amended restricts, in its article 4, the production, manufacture, export, import, distribution of, trade in, use and possession of controlled narcotic drugs to medical and scientific purposes, the Board states that legalization measures or regulations that permit the use of any controlled substance, including cannabis, for non-medical purposes are inconsistent with the obligations of States parties to that Convention. The Board calls upon all States to respect their Convention obligations in the development of their national drug control policies.

Cultivation of cannabis for medical purposes

788. The Board notes the increasing number of countries that are permitting the cultivation of cannabis for medical purposes, in some cases solely for export to jurisdictions that permit the use of cannabis for medical purposes. Any export to a jurisdiction that permits the use of cannabis for medical purposes is subject to an obligation to submit estimates to the Board, pursuant to the 1961 Convention as amended. In discharging its treaty mandates, the Board reviews and approves annual estimates provided by Governments regarding the quantities of cannabis to be cultivated and consumed. In addition, the Board's secretariat continues to receive enquiries from Governments requesting clarification on treaty provisions regarding the cultivation of cannabis for medical purposes and related control measures to ensure that cannabis is not diverted to illicit channels.

Recommendation 3: The Board wishes to recall that Governments that permit the cultivation of cannabis for medical purposes have an obligation to establish control measures in accordance with article 23 of the 1961 Convention as amended. Such measures include the establishment of an agency responsible for designating areas and issuing licences for cultivating, purchasing and taking physical possession of such crops as soon as possible and having the exclusive right of importing, exporting, wholesale trading and maintaining stocks other than those held by manufacturers.

Recommendation 4: The Board recommends that Governments that allow the use of cannabinoids for medical purposes monitor and evaluate the potential diversion to trafficking or other unintended consequences of those programmes.

789. The Board notes the advancement of genetic engineering technologies and other biotechnologies that allow for the modification of the cannabis plant, as well as other technologies that may allow for the non-conventional manufacture of cannabinoids. These technologies allow for the optimization of industrial processes and to more precisely adjust the yields of the types of cannabinoids being produced.

Recommendation 5: The Board calls upon Governments to take note of the advances in genetic engineering and biotechnology in the cultivation of cannabis, as well as other technologies that can allow for the manufacture of cannabinoids through non-conventional means. The Board also calls upon Governments to ensure that these technologies are appropriately used with respect to the

international drug control conventions and to take steps to prevent the misuse of such technologies in the illicit manufacture of drugs.

Universal adherence to the international drug control conventions

790. The three international drug control conventions represent 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 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 6: The Board reiterates that universal ratification of the international drug control conventions is important for strengthening the international licit drug control framework and for preventing traffickers from targeting non-parties owing to actual or perceived weaknesses in the scope of control of scheduled substances. Accordingly, the Board urges all States not yet having 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.

Availability of and access to narcotic drugs and psychotropic substances, including during the COVID-19 pandemic

791. Since the beginning of 2020, the COVID-19 pandemic has brought forth unprecedented challenges to the economies and public health systems of all countries. The measures adopted by most countries to reduce the number of infections and contain the further spread of the virus have put to the test the ability of the international community to ensure adequate access to and availability of internationally controlled drugs for those in need.

792. The Board is concerned about reported shortages of medicines containing controlled substances such as fentanyl and midazolam in some countries, largely driven by significant increases in the need to provide pain relief

and sedation for patients with COVID-19 admitted into intensive care units.

Recommendation 7: The Board recommends that countries review their forecasts for demand and streamline all the necessary administrative and logistical requirements. To that end, all Governments are encouraged to continue working closely with each other and the Board to ensure the global availability of medicines containing controlled substances, especially for those who are most in need during emergency situations.

Recommendation 8: The Board calls upon Governments that report inadequate and very inadequate levels of consumption of opioid analgesics to develop appropriate control systems and implement balanced public health policies to ensure rational and adequate consumption of these substances, in cooperation with civil society, the pharmaceutical industry and the international community.

793. The Board has noted that inadequate availability and poor access to psychotropic substances represent threats related to the control and rational use of such substances, in particular for the treatment of mental health and neurological conditions. The lack of consumption data of psychotropic substances in many parts of the world remains the main challenge in assessing and analysing the trends in their availability and in providing appropriate assistance to those countries where availability is scarce.

794. The Board notes with appreciation that a number of countries have been reporting national data on the consumption of psychotropic substances on a voluntary basis. Being aware of the difficulties some Governments face in this regard, the Board prepared a compilation of methodologies for the collection of data on the consumption of psychotropic substances, with the aim of addressing the disparity in data collection on the consumption of psychotropic substances.

Recommendation 9: The Board calls upon all Governments to report on the consumption of psychotropic substances on an annual basis, pursuant to Commission on Narcotic Drugs resolution 54/6, as such data are essential for an improved evaluation of the availability of psychotropic substances for medical and scientific purposes. The Board encourages all Governments to make use of the recently prepared compilation of methodologies for the collection of data on the consumption of psychotropic substances and stands ready to assist Government in this regard.

Human rights and peace and security

795. The Board has recognized that policies in some countries, under the pretext of the “war on drugs”, have led to disproportionate and overly repressive responses without respect for due process and the rule of law. Such responses contribute to an increase in violence and related death rates. The Board reiterates that drug-related crime is to be addressed through formal criminal justice responses and strict adherence to internationally recognized due process standards.

796. With a view to achieving the Sustainable Development Goals, in particular Goal 16, the Board notes that the provisions of the international drug control conventions related to supply reduction, together with the provisions of the conventions pertaining to reducing demand for illicit drugs, constitute some of the essential elements of a comprehensive, integrated and balanced approach. The provisions of the international drug control treaties related to criminal justice, covering issues such as penal provisions, international judicial and law enforcement cooperation, asset forfeiture and confiscation, can serve as effective legal instruments in addressing not only drug-related offences, but also any associated criminal activity, such as organized crime, corruption and money-laundering.

Recommendation 10: The Board wishes to call upon Governments to counter drug trafficking and related violence through comprehensive and balanced measures. These include effective prevention and criminal justice responses and alternative development initiatives that target the financial incentives offered by drug trafficking. They should also ensure that the responses to drug-related criminal conduct are proportionate and founded upon respect for human rights and dignity, in line with the three international drug control conventions, international human rights instruments and the rule of law.

Recommendation 11: The Board reminds all Governments that extrajudicial action in relation to persons suspected of drug-related offences, taken in purported pursuit of drug control objectives, is inconsistent with their obligations under the three international drug control conventions. All drug control actions taken to comply with these obligations should be taken with full respect for the rule of law and due process of law and the principle of proportionality.

Prevention and treatment, including during the COVID-19 pandemic

797. The Board has repeatedly stressed the importance of respecting human rights and fundamental freedoms as part of the effective implementation of the international drug control treaties. INCB continues to emphasize that, for prevention and treatment measures to be successful and sustainable, they must be consistent with international human rights standards. 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 disorders and potential related harms.

Recommendation 12: The Board discourages the use of compulsory treatment for the rehabilitation of patients suffering from drug use disorders and calls upon all Governments concerned to implement voluntary, evidence-based treatment services with due respect for patients’ human rights, such as services based on the *International Standards for the Treatment of Drug Use Disorders* developed by UNODC and WHO and other relevant international standards that Member States, in the outcome document of the special session of the General Assembly on the world drug problem held in 2016, recommended that countries promote and implement.

798. The Board is concerned about the reported halting, in many parts of the world, of treatment services for people who use drugs and of measures to reduce the negative consequences of drug use, as a result of the COVID-19 pandemic. The ongoing provision of drug use treatment services during any health crisis remains of the utmost importance and such services should continue to operate, with health and safety measures in place to guarantee the prevention of infections among personnel providing services, as well as among the recipients of such services.

Recommendation 13: The Board urges Governments to ensure the continued provision of treatment services for mental health and substance use disorders as part of essential services. Governments are recommended to look at existing best practices and develop effective strategies to ensure that prevention and evidence-based treatment, rehabilitation, aftercare and social reintegration services continue to operate. In that regard, Governments are encouraged to refer to chapter I of the Board’s annual report for 2017, entitled “Treatment, rehabilitation and social reintegration for drug use disorders: essential components of drug demand reduction”, and

the UNODC–WHO *International Standards for the Treatment of Drug Use Disorders*.

Data collection and reporting

799. Competent national authorities play a key role in consolidating the data received from pharmaceutical companies, importers and exporters and other authorized agents within their jurisdictions to ensure that complete and reliable data are provided in a timely manner to the Board. However, some Governments fail to provide the Board with timely and adequate estimates and assessments or reliable statistical returns, including quarterly and annual statistics on manufacture, consumption and international trade.

800. Accurate and timely reporting is an important indicator of the effectiveness and efficiency of drug control systems and the availability of good-quality data is vital for the Board to accurately carry out the monitoring function accorded to it under the international drug control treaties. The quality of some data is a concern for the Board, particularly if they are data from major producing and manufacturing countries, as they indicate deficiencies in national mechanisms for regulating and monitoring internationally controlled substances

Recommendation 14: The Board urges Governments to provide, in an accurate and timely manner, their annual and quarterly statistics on the manufacture of, consumption of and international trade in internationally controlled substances as required by the treaties and relevant resolutions of the Economic and Social Council and the Commission on Narcotic Drugs.

Recommendation 15: The Board urges Governments to continue to strengthen their national mechanisms to monitor the cultivation, production and manufacture of and trade in controlled substances. This may be achieved, in part, by improving and developing national data-collection systems, training staff of the competent national authorities, including at times of staff turnover, enhancing inter-agency cooperation and ensuring close cooperation with companies licensed to deal with internationally controlled substances.

801. Diversion from licit domestic channels remains a major source of internationally controlled substances used for illicit purposes; however, there remain limited reports to the Board from Governments 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

preparations containing internationally controlled substances from the licit international market.

Recommendation 16: The Board acknowledges the interdiction efforts, by the Governments concerned, in relation to trafficking in internationally controlled substances and calls upon all Governments to furnish regularly to the Board, pursuant to Commission on Narcotic Drugs resolution 50/11, information on seizures of controlled substances ordered over the Internet and delivered through the mail.

802. Strengthening international cooperation in drug control requires a collective understanding of common challenges and the identification of mutual approaches to key concepts and issues. In line with the 2019 Ministerial Declaration, the Board seeks to promote the collection, analysis and sharing of quality and comparable data. This requires the continued identification of any scientific or legal ambiguities in the terminology chosen in the drafting of drug policies.

Recommendation 17: The Board urges Governments to continually examine any drug terminology that has ambiguous usage, or potentially stigmatizing effects, and that might have an impact on the ability of the international community to cooperate effectively on and jointly counter the world drug problem.

Precursor chemicals

803. Since the entry into force of the 1988 Convention, in November 1990, there have been two major developments that the Board has identified as having changed the precursor control landscape. Firstly, there has been a shift in the diversion of precursors from international to domestic trade. This places a greater emphasis on the functioning of domestic control systems, which the 1988 Convention leaves to the discretion of States parties. Secondly, there have been major increases in the sophistication and diversification of illicit drug manufacture and the sourcing of chemicals. The emergence and proliferation of designer precursors, pre-precursors and other non-scheduled chemicals for use in illicit activities have been among the focus areas of the Board for the past few years.

Recommendation 18: The Board urges Governments to pay increased attention to establishing and implementing comprehensive precursor monitoring systems at the national level and, in particular, to make use of the guidance provided in article 12, paragraph 8, of the 1988 Convention. The Board encourages Governments

to improve the accuracy of estimates of annual legitimate requirements for individual precursors with a view to ensuring that they always reflect actual market conditions, and to make better use of the Board's focal point network under Project Prism and Project Cohesion, which also offer a platform for the exchange of information on best practices in precursor control.

Recommendation 19: The Board urges Governments to continue to explore various options to address the proliferation and use of non-scheduled precursors for illicit activities. Since the timely sharing of information about such chemicals is essential, the Board encourages Governments to use PICS more actively.

804. Over the years, the Board has observed the increasing use of the Internet and social media platforms for the sourcing of precursors and non-scheduled chemicals. Some Governments have been successful in countering diversion attempts of precursors by partnering with business-to-business Internet platforms (more details can be found in the Board's reports since 2018 on the implementation of article 12 of the 1988 Convention).

Recommendation 20: The Board encourages Governments to focus their efforts on the "clear web", or "surface web", to prevent the misuse of the Internet for the diversion of precursors, non-scheduled chemicals and equipment into illicit channels. Governments are invited to share successful national approaches and, in that regard, to refer to the approaches discussed in the Board's reports on the implementation of article 12 of the 1988 Convention. To complement these efforts, Governments are also encouraged to refer to the limited international special surveillance list, which contains chemicals for which substantial information exists on their use in illicit drug manufacture.

New psychoactive substances, emerging non-medical synthetic opioids and other dangerous substances

805. The illicit manufacture and use of and trafficking in non-medical synthetic opioids and new psychoactive substances remain significant challenges for international drug control efforts. Online vendors continue to use the Internet, the darknet and social media sites to offer these substances. Shipments continue to be trafficked through international mail and express courier services. The Board continues to promote partnerships among Governments, international organizations and the private sector to prevent and interdict sales of new psychoactive substances,

emerging non-medical synthetic opioids and other dangerous substances. The Board notes the need to monitor, in particular, manufacturers of chemical reference and pharmaceutical products; online marketing, search, registries and registrars and social media platforms; postal, express mail, express courier, air cargo, freight forwarding and related transport sectors; and online financial, e-wallet and monetization industries.

Recommendation 21: The Board emphasizes the need for increased efforts to reduce trafficking in new psychoactive substances and emerging non-medical synthetic opioids and invites Governments to nominate active law and regulatory enforcement focal points in police, drug control, customs, postal and regulatory agencies to participate in INCB special intelligence-gathering operations and to make full use of the IONICS secure communication platform and the capacity-building and equipment available under its GRIDS Programme, Project ION and the OPIOIDS project.

Recommendation 22: The Board encourages Governments to work with the GRIDS Programme and its public-private partnership initiative to establish and strengthen partnerships with relevant sectors, with the goal of voluntarily identifying, preventing and eliminating vendors attempting to exploit legitimate industry for the purposes of trafficking in dangerous new psychoactive substances not under international control.

Recommendation 23: The Board continues to expand its list of fentanyl-related substances with no known legitimate medical or industrial use as a practical tool for use by relevant national authorities, international partners and other stakeholders, including private sector partners, the scientific community and academia, and calls upon Governments to take appropriate measures to prevent the illicit manufacture, marketing, movement and monetization of those fentanyl-related substances.

806. In the past year, the number of drug overdoses deaths from illicit drug use – especially fentanyl and methamphetamine – have increased in North America and in some other regions of the world. The crisis was further exacerbated by the COVID-19 pandemic, which is expected to contribute to increasing numbers of people struggling with mental health and substance use disorders, coupled with corresponding increases in depression, anxiety, trauma and grief.

Recommendation 24: The Board once again encourages Governments to work together with public health officials, pharmacists and physicians, manufacturers and distributors, consumer protection associations and law

enforcement agencies to promote public education about the risks associated with the improper use of prescription drugs, illicitly produced synthetic opioids and methamphetamine and to adopt appropriate measures to decrease their use and risk of overdose.

International import and export authorization system for narcotic drugs and psychotropic substances

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

808. 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, to encourage a wider adoption of the system and greater user engagement.

Recommendation 25: INCB encourages Governments that have not yet done so to request the assistance of the INCB secretariat in implementing and integrating I2ES into their national systems, including through the provision of guidance on first steps and additional initial training.

Recommendation 26: In addition, the Board wishes to reiterate to Member States the need for continual support, including extrabudgetary resources, to expand the functionality of I2ES, address technical issues identified by Governments and provide expanded training to further support countries in adopting and implementing the platform.

Specific countries and regions

809. The lack of official information and data regarding the trafficking in drugs, the prevalence rates of drug use as well as drug use prevention and treatment efforts in many regions, but specifically in Africa and Oceania, remains a concern for the Board. The lack of such information hinders efforts by the international community to fully assess the drug problem in these regions.

810. Trafficking in drugs has increased in many Pacific island States, as Oceania is increasingly becoming a transit point for drug trafficking between the Americas and Asia. Moreover, the illicit manufacture and consumption of synthetic drugs are increasingly taking place in the Pacific island States. Many of these countries lack the capacity to respond to these challenges.

Recommendation 27: 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.

Recommendation 28: Recognizing that national capacities in many countries in Oceania are inadequate to respond to the threat of drug trafficking and that the consumption of drugs is on the rise in those countries, the Board requests that the international community provide support to enhance the capacities of Pacific island States to address these new challenges and to safeguard their citizens' health.

811. Despite a decrease in the area used for the cultivation of opium poppy in Afghanistan, illicit production of opium has remained at almost the same level from 2018 to 2019, possibly owing to higher yields. The low price of opium during planting time was one of the main drivers of the decline in cultivation. Afghanistan has accounted for almost 84 per cent of global opium production over the past five years and, to date, there have been no indications of a reduction in the supply of heroin of Afghan origin to consumer markets globally.

Recommendation 29: The Board notes with concern that continued large-scale illicit opium poppy cultivation and opium production in Afghanistan, coupled with limited eradication efforts, further undermine the efforts of Afghanistan and its partners to promote peace, security and sustainable development in the country. The Board reiterates its call for further technical and financial assistance to address the drug control challenges in the country.

Psychotropic substances

812. The universal application of the requirement for import and export authorizations laid down in the 1971 Convention is key to preventing the diversion of drugs into the illicit market. The 1971 Convention does not require import and export authorizations for trade in the

psychotropic substances listed in its Schedules III and IV. However, in view of the widespread diversion of those substances from licit international trade during the 1970s and 1980s, the Economic and Social Council, in its resolutions 1985/15, 1987/30 and 1993/38, requested Governments to extend the system of import and export authorizations to cover those psychotropic substances as well.

Recommendation 30: The Board urges the Governments of the few remaining States in which national legislation

and/or regulations do not yet require import and export authorizations for all psychotropic substances, regardless of whether they are States parties to the 1971 Convention, to put into place such legislation or regulations at the earliest opportunity. The Board urges Governments to extend such controls to all substances listed in Schedules III and IV of the 1971 Convention as soon as possible, including those recently scheduled and to inform the Board in that regard.

(Signed)
Cornelis P. de Joncheere, President

(Signed)
Bernard Leroy, Rapporteur

(Signed)
Stefano Berterame, Secretary a.i.

Vienna, 13 November 2020