

1999 substantive session of the Economic and Social Council

Statement by A. Lourenço Martins President of the International Narcotics Control Board

Excellencies, distinguished delegates, ladies and gentlemen,

As foreseen in the international drug control treaties, the reports of the International Narcotics Control Board are submitted to the Economic and Social Council, through the Commission on Narcotic Drugs. The Commission examined the Board's report at its forty-second session held in March in Vienna. The extensive and detailed comments of the Commission on the findings of the Board's report have been summarized in the Report of the Commission which has been submitted to the Council.

In accordance with the current working arrangement, I will not comment on any subject related to the INCB Report, although the Report is submitted to this body, unless this is requested by Governments represented here.

About two months ago the Council elected six new members for the Board. Shortly before the election my predecessor, Professor Ghodse, briefed the Permanent Missions in New York on the Board's functions and the required qualifications of its members, as stipulated in the 1961 Single Convention on Narcotic Drugs. One paramount requirement for membership in the Board is independence. Board members serve in their personal capacity not as Government representatives. The Convention requires that Board members must not hold a position or engage in any activity which would be liable to impair their impartiality in the exercise of their functions. While Governments, when electing members to the Board, should make sure that nominees are able to act independently and not in governmental capacity upon their entry into the Board, the Board has established its own procedure which guarantees that its members remain independent throughout their term of office.

Secondly, in the interest of effectiveness and credibility, the composition of the Board must mirror the drug problems in the world. The 1961 Convention recognizes this concept by requesting the Council to take into account the principle of equitable geographical distribution, and to consider, "including on the Board, in equitable proportion, persons possessing a knowledge of the drug situation in the producing, manufacturing and consuming countries, and connected with such countries." Through the involvement of the World Health Organization in the process of nominating candidates for the Board, the Convention attempts to ensure that appropriate medical and pharmacological experience is also represented on the Board.

Unfortunately, the high standards set by the 1961 Convention have not been entirely met by the results of the May elections. There is still no equitable geographical distribution of members: Eastern Europe and particularly Africa, where the drug problem has become a

significant problem are underrepresented. Secondly, there is no balance as regards the professional backgrounds of Board members. While the Board consists of medical doctors, drug control administrators and drug law enforcement officers, as of May 2000, when the newly elected Board members take their place, legal practitioners will no longer be represented on the Board. There will be no Board member with experience in applying and interpreting the law, something which is essential when analysing Government performance under the treaties. This imbalance should be rectified at the latest, in the next elections for the Board.

Mr. Chairman,

More than one year has passed since the landmark Special Session of the General Assembly on the World Drug Problem and already, some countries have achieved impressive results in making the ambitious goals of the action plans adopted at the Special Session a reality. The results obtained by Bolivia and Peru in the eradication of coca bush are encouraging. The Board is confident that the momentum generated by the Special Session can be maintained for the years to come. The Board believes that the Commission on Narcotic Drugs will fulfill the task of monitoring the implementation of the action plans with conscientiousness. The Board will cooperate with the Commission in this undertaking, through its monitoring of the implementation of the international drug control treaties.

One condition for meeting the goals and objectives set by the Special Session is the ratification and implementation of all the international drug control treaties. Unfortunately, while the treaties enjoy almost universal adherence, there are several cases where treaty compliance has been difficult to achieve. The Board remains concerned about the far-reaching reservation entered by the Government of Lebanon in 1996 on the anti-money-laundering provisions of the 1988 Convention. Entering a reservation on these provisions defeats one of the major objectives of the Convention. The Board has stated that it considers that reservation questionable from legal and policy perspectives. Many Governments share the Board's perception and have objected to the reservation on the grounds that it is contrary to the object and purposes of the 1988 Convention and therefore not in conformity with the provisions of the Vienna Convention on the law of the treaties. It is all the more regrettable that the Government of Lebanon has not relented and revoked the passage in question, and therefore remains unable to address the issue of money-laundering in an adequate manner. The Board is also concerned about the de-facto, and in some cases, de jure, decriminalization of drug use in some countries as well as the establishment of "shooting galleries" and the distribution of syringes in prison -- situations which are not in strict accordance with the provisions of the conventions.

Serious deficiencies in national drug control systems and a prolonged absence of cooperation by some Governments with the Board have forced the Board to invoke articles 14 of the 1961 Convention and article 19 of the 1971 Convention, which would ultimately lead to a recommendation by the Board to the Council to ban imports and exports of narcotic drugs and psychotropic substances to those countries. Article 19 of the 1971 Convention was invoked in respect of two States which had repeatedly delayed the

promulgation of regulations to give effect to certain mandatory control measures under the 1971 Convention. The lack of mandatory controls increased the risk of diversion of psychotropic substances from licit international trade, given the volume of trade involving the States in question. The Board is satisfied that both Governments have expedited measures to remedy this situation and has decided to terminate further action under this article or suspend the procedure.

Both articles were further invoked in respect of four other States because of their persistent failure to furnish information required under the international drug control treaties and to respond to enquiries of the Board, despite numerous reminders and the international technical assistance, including training, given to them in the field of drug control. In these cases, it has been possible to establish a dialogue with the Governments of all of those States and the Board trusts that they will soon comply fully with their obligations under those conventions.

The Board also invoked both articles to a State that had ceased reporting to the Board, in particular on the cultivation of opium poppy on its territory, and that had not given a positive reply to the Board's request to send a mission or to the Board's enquiries, notwithstanding numerous opportunities given to it to clarify the drug control situation within its territory. Although the country in question is not a party to the international conventions, the Board has received indications that a serious situation could develop which needs cooperative action at the international level. I am pleased to inform you that even in this difficult case, the Government has finally initiated a dialogue at the technical level.

Mr. Chairman,

No one will deny that international action against drugs has made significant progress in the past 100 years. Change has come about through the adoption of a series of international drug control treaties which address all aspects of the drug problem -- universal treaties which enjoy wide acceptance. Progress has also been made because States have made use of information at their disposal and have acted decisively to attack the drug problem. Nevertheless there are challenges to be faced. One of them is the global imbalance of the availability of drugs for appropriate medical and scientific purposes. Many countries, mostly in the developing world, experience serious shortages of pain management drugs. There is an immense gap in the usage of morphine, codeine and other opioids to relieve pain. The per capita use of the top 20 consuming nations of those substances is more than NINETY TIMES higher than the per-capita consumption of the bottom 20 consumers. On the other hand, in a number of mainly industrialized countries the consumption of certain psychotropic substances has reached unprecedented high levels and the medical appropriateness of very liberal prescribing practices should be urgently addressed by Governments in order to avoid possible abuse patterns to develop further. The Board, which is mandated to secure that drugs are accessible for medical use, has been examining this issue and will address it in its 1999 report. One should also examine how the United Nations can provide concrete assistance to countries in procuring the medication they need.

The Board remains concerned over the tendency to subject very technical and scientific questions related to the medical use of psychoactive substances to public vote. Issues such as the question whether or not substances like heroin or cannabis should be used medically must be decided by science and not by public vote.

Over the past years, some countries have embarked on administering heroin to severely dependent addicts, on an experimental basis. It is in the interest of science and in the interest of overall, universal progress against the drug problem, that such experiments and similar other trials in drug control are accompanied and evaluated by an independent, international observer body which can vouch for the credibility of results achieved.

Thank you for your attention.