

Righting a historical wrong: The UN review of the international status of the coca leaf

‘International drug control policies contradict the rights of Indigenous Peoples to self-determination, to the use of their natural resources, to their culture, agriculture and medicines, all rights enshrined in the UN Declaration on the Rights of Indigenous People and the ILO Convention 169’¹

Mr. Francisco Cali Tzay, UN Special Rapporteur on Indigenous Peoples

Introduction

In July 2023, the World Health Organization (WHO) received a formal notification by the Plurinational State of Bolivia² requesting the Expert Committee on Drug Dependence (ECDD) to conduct a critical review of the coca leaf, and to provide recommendations on its status within the 1961 Single Convention on Narcotic Drugs.

This critical review comes nearly 75 years after the United Nations (UN) called for the abolition of traditional uses of the plant. This is despite the fact that coca has been used for millennia by Indigenous Peoples in the Andean-Amazonian region for traditional, religious, ancestral and medicinal purposes. At an event held at the occasion of the 67th session of the UN Commission on Narcotic Drugs (CND), Bolivia’s Vice-President, David Choquehuanca, described the critical review as ‘an important step in righting the historical wrong of the 1961 Convention that destined the coca leaf for extermination and a move towards reconciling the drug control treaty system with the rights of Indigenous Peoples’.³

This advocacy note provides background information on the scheduling of the coca leaf in the international drug control treaties, outlines the coca review process, and makes the human

rights case for the removal of the leaf from the treaty schedules. Removing the coca leaf from the schedules would mean that it could be used in its natural form, as it would no longer be under international control as a narcotic drug itself. The review, however, will not consider the status of cocaine, which would remain scheduled, and as such the cultivation of the coca plant for the purpose of illegal cocaine production would remain prohibited due to certain treaty articles. The note concludes with a series of recommendations for the WHO and policy makers regarding key steps that may be undertaken in support of the review process.

Background: understanding the international status of the coca leaf

The coca leaf in the 1961 and 1988 conventions

The coca leaf is listed in Schedule I of the 1961 Single Convention on Narcotic Drugs, alongside cocaine and subject to the same very strict international control measures. Article 49 of the Convention also requires States to abolish the traditional uses of the coca leaf ‘within twenty-five years from the coming into force of this

Convention',⁴ a deadline which expired at the end of 1989.⁵ While article 14.2 of the 1988 UN Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances allows States to 'take due account of traditional licit uses, where there is historic evidence of such use', the Convention also makes it clear that these provisions cannot derogate from any previous treaty obligations, including those from the 1961 treaty.

The classification of the coca leaf as a narcotic drug under the 1961 treaty requires that its use should be strictly limited to medical and scientific purposes (article 4), with only a few exceptions. Article 27 permits 'the use of coca leaves for the preparation of a flavouring agent, which shall not contain any alkaloids', allowing de-cocainised coca products as an ingredient in foods or beverages (like Coca Cola). In addition, under article 2.9, the coca leaf (like any other scheduled drug) can legitimately be used in industry for non-consumables such as cosmetics, dyes and fertilisers, provided that those products 'are not liable to be abused or have ill effects... and that the harmful substances cannot in practice be recovered'.

Repairing the historical errors in prior WHO positions

The decision to place the plant under such strict international controls was based on a report produced by the Economic and Social Council

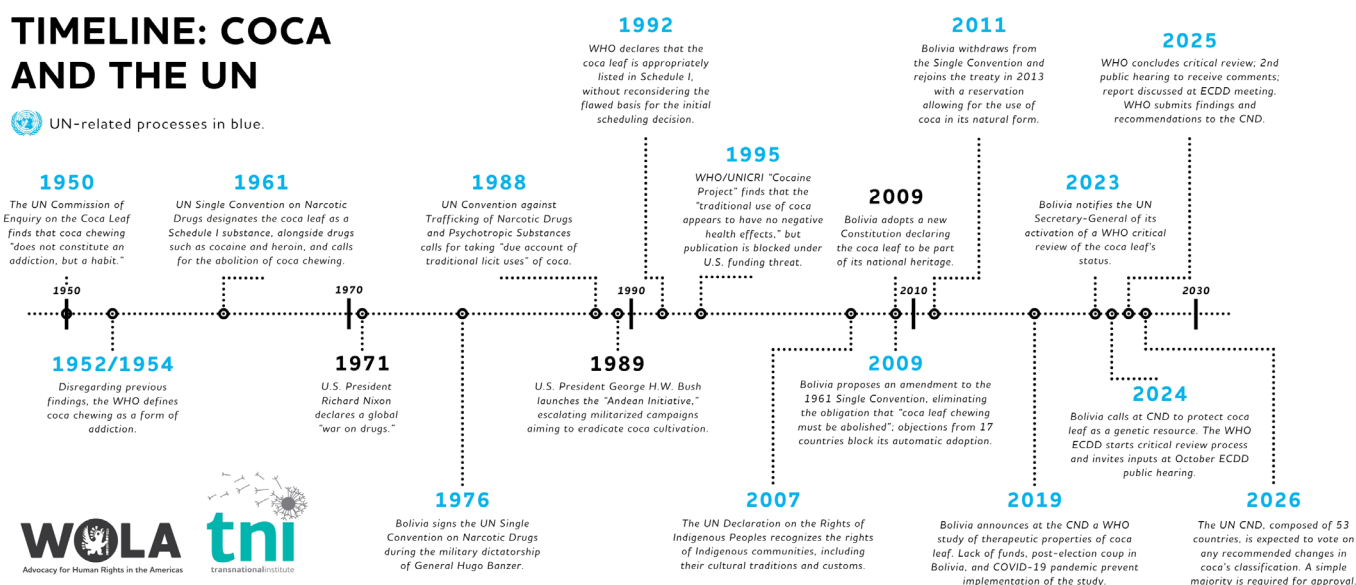
(ECOSOC) in 1950 following a study visit in Peru and Bolivia. While the report concluded that coca chewing did not 'constitute an addiction (toxicomania), but a habit',⁶ it was mired in colonialist bias and racist 'findings', which also ignored the medicinal, nutritional, social, cultural and religious benefits of the coca leaf for Andean and Amazonian populations. The report was considered in two ECDD meetings held in 1952 and 1954, during which the Committee concluded that coca chewing was 'considered a form of cocaineism', and therefore had to be abolished.⁷ This led a number of policy makers in both Peru and Bolivia – the two countries that had originally requested the ECOSOC study – to question the outcome of the report, and demand a serious scientific study on the coca leaf, to no avail.

Four decades later, in 1992, the question of the coca leaf appeared on the WHO ECDD's agenda again at the prompting of Bolivia, and coca was added to the list of substances to be considered for a critical review. However, a scientific, critical review of the plant once again failed to materialise as the ECDD concluded that 'the coca leaf is appropriately scheduled under the Single Convention on Narcotic Drugs, 1961, since cocaine is readily extractable from the leaf'.⁸

This pre-review process took place in tandem with the 'WHO/UNICRI Cocaine Project' which consisted in surveys conducted in 19 countries across five continents by 45 experts in the field

TIMELINE: COCA AND THE UN

 UN-related processes in blue.



Box 1 Addressing concerns over the ‘ease of convertibility’ of the coca leaf into cocaine

One of the key considerations the ECDD will be assessing when deciding whether to recommend a change in the international control of the coca leaf is whether it is ‘convertible into a substance already in Schedule I or Schedule II’. According to the WHO, ‘a substance is convertible if it is of such a kind as to make it, by the ease of the process and by the yield, practicable and profitable for a clandestine manufacturer to transform the substance in question into controlled drugs’.⁹

In assessing whether this is the case, it is important to avoid conflating the terms ‘extraction’ (i.e., concentration) and ‘conversion’ (i.e., transformation). Cocaine molecules are already present in the plant material, and can be *extracted* without any *conversion*.¹⁰

In the 1950s, the argument for inclusion of the coca leaf in Schedule I of the 1961 Convention was based on its perceived liability to ‘abuse’ and its ‘similarity’ with the effects of cocaine – not on its ‘convertibility’ to cocaine.¹¹ In 1992, the ECDD, without any sustaining documentation, concluded that the coca leaf was appropriately scheduled because ‘cocaine is readily extractable from the leaf’¹² – but without commenting on whether it meets the ‘ease of convertibility’ criterion.

It is undeniable that the coca leaf can be used as a raw material in cocaine manufacture. However, it does not meet the ‘convertibility’ criterion of the 1961 Single Convention. The original draft of the Single Convention had, in fact, proposed to include ‘crude cocaine’ (i.e., coca paste or cocaine base) in Schedule I, defined as ‘any extract of coca leaf which can be used for the manufacture of

cocaine’. In the end, however, the coca leaf itself was scheduled.

To better understand why the coca leaf does not meet the ‘ease of convertibility’ criterion, a useful parallel can be made with poppy straw. At its 32nd session in 2000, the ECDD had concluded that:

‘In considering poppy straw, the Committee noted that there are some varieties of opium poppy which contain only negligible concentrations of opiates. The Committee further noted that the poppy straw extracts that are actually abused are already controlled under the 1961 Convention because these extracts meet the definition of a “preparation” (a mixture, solid or liquid containing a drug controlled under the 1961 Convention)... Since the scheduling criterion would require poppy straw to be readily convertible to a controlled drug, the Committee did not recommend critical review’.¹³

The consideration that there are some varieties which contain only negligible concentrations of alkaloids equally applies to the coca leaf. And as for poppy straw, it can also be argued that the ‘extracts that are actually abused are already controlled under the 1961 Convention’ since coca paste and cocaine base are both included in the Yellow List annex of the 1961 Single Convention.¹⁴ Furthermore, the basic premise of the Convention is that plant materials are only scheduled as a narcotic drug when they are considered to produce harmful effects similar to other scheduled substances, which is not the case if one compares coca leaf chewing with cocaine use.¹⁵

of drug research. The resulting report concluded that ‘the traditional use of coca appears to have no negative health effects and that it serves positive therapeutic, sacred and social functions among indigenous groups in the Andean region’. The Project report also recommended that the WHO investigate the therapeutic benefits of the coca leaf, as well as the impacts of repressive measures on specific individuals and populations of users.¹⁶ However, due to political pressure from the USA, the study was never officially published by the WHO.¹⁷

Understanding the ECDD critical review procedure

The Bolivian request to initiate a critical review of the coca leaf – which is now officially supported by Colombia – aims to correct the historical error of listing the plant in the 1961 Convention and banning its traditional uses. The critical review process was officially started by the WHO on 30 November 2023.¹⁸

The critical review report will cover 18 issues, divided into five clusters:¹⁹

Cluster 1: Chemistry

1. Substance identification by International Nonproprietary Name (INN), chemical or other common name and trade names, other identifying characteristics, Chemical Abstracts Service (CAS) registry number
2. The substance's chemistry
3. The ease of convertibility into controlled substances (see Box 1 for more details)

Cluster 2: Pharmacology

4. General pharmacology (including routes of administration and dosage, pharmacokinetics, pharmacodynamics)
5. Dependence potential
6. Abuse potential

Cluster 3: Toxicology

7. Toxicology
8. Adverse reactions in humans

Cluster 4: Therapeutic/traditional use

9. Therapeutic applications and extent of therapeutic use and epidemiology of medical use
10. Listing on the WHO Model List of Essential Medicines
11. Marketing authorisations (as a medicinal product)

Cluster 5: Epidemiology

12. Industrial use
13. Non-medical use, abuse and dependence
14. Nature and magnitude of public health problems related to misuse, abuse and dependence
15. Licit production, consumption and international trade
16. Illicit manufacture and traffic, and related information
17. Current international controls and their impacts
18. Current and past national controls.

By May 2024, a first expert had been contracted by the ECDD to work on the 'chemistry' cluster.

The ECDD issued a call for tenders in early July 2024 to identify experts for the remaining clusters. The critical review report to be produced jointly by the experts aims to present 'available robust evidence of the coca leaf',²⁰ and will form the basis of the ECDD's recommendations on the international status of the coca leaf.

The first day of the 47th session of the ECDD²¹ which will be held from 14 to 18 October 2024) will include an 'Information Meeting' during which Indigenous Peoples, civil society and academia will have a first opportunity to provide inputs for the coca leaf review. They will also be able to provide written contributions ahead of the session.

In June/July 2025, a questionnaire will be sent by the WHO to 'ministers of health in Member States and international drug control bodies', to collect relevant information that will be considered by the ECDD. While this is usual practice, in the context of the coca leaf it would be advisable for the WHO to extend the invitation of responding to the questionnaire to Indigenous Peoples and relevant UN entities, in particular the UN Permanent Forum on Indigenous Issues (UNPFII), the OHCHR section on Indigenous Peoples and Minorities, the Expert Mechanism and the Special Rapporteur on Indigenous Rights, the UN Committee on Economic, Social and Cultural Rights, the International Labour Organization,²² and the WHO's own Global Centre for Traditional Medicine. This would, among other things, give these recipients an opportunity to provide key information relating to the traditional uses of the plant.

Inputs from civil society, academia and Indigenous Peoples, as well as responses to the questionnaire, will all be considered in the critical review process.

The critical review report will then be presented by the experts and discussed by the ECDD at the 48th session of the ECDD, planned for September-October 2025. The 48th session will include a second public hearing, providing another opportunity for further written and oral inputs from representatives of Indigenous Peoples, civil society and academia. In the meeting, the ECDD will decide on the recommendation(s) to be made to the CND, based on the evidence presented in the

The UN review of the international status of the coca leaf

A timeline

2023

Bolivia requests critical review

Bolivia requests the World Health Organization (WHO) to initiate a critical review of the scheduling of the coca leaf

Jul.

Nov.

WHO announces review

WHO General Director announces the start of the critical review of the coca leaf

Colombia supports review

Colombia formally joins Bolivia in support of the critical review of the coca leaf

Jun.

2024

2 Jul. - 14 Aug.

ECDD recruits experts

The Secretariat of WHO's Expert Committee on Drug Dependence (ECDD) recruits experts to draft the critical review report

ECDD conducts literature review

ECDD experts conduct a comprehensive literature review on the coca leaf

Aug. - Dec.

14 - 18 Oct.

47th session of the ECDD

First public hearing on the coca leaf

ECDD drafts critical review report

WHO's ECDD experts produce a report on the chemistry, pharmacology, toxicology, therapeutic and traditional use, and epidemiology of the coca leaf

Jan. - Sep.

Jun. / Jul.

ECDD sends questionnaire

ECDD sends questionnaire to Member States

2025

Draft critical review available to stakeholders

The draft critical review report is made available to relevant stakeholders (one month prior to the ECDD's 48th session)

Sep.

Oct.

48th session of the ECDD

Critical review considered
Second public hearing on the coca leaf

Dec.

Vote on recommendations

The Commission on Narcotic Drugs (CND) votes on scheduling recommendations

Mar

2026

Mar. - Apr.

Official communication on voting

Communication of voting decision by the UN Secretary-General to Member States, WHO, INCB
Entry into force of the decision

Possibility of ECOSOC review

Possibility to request a review of the voting decision

Apr. - Jul.

critical review report, alongside the additional information provided by Member States and other stakeholders.

The ECDD could make three general recommendations:

- **Option 1: Remove the coca leaf from the schedules of the 1961 Single Convention altogether** – this is the preferred option, as will be further elaborated in this advocacy note.
- **Option 2: Transfer the coca leaf from Schedule I to Schedule II of the 1961 Single Convention** – this means that the coca leaf would still be classified as a ‘narcotic drug’ and remain subject to most provisions of the treaty (including the general obligation to limit its use to medical and scientific purposes), with the exception of the requirement of medical prescription, and with less rigorous administrative controls on the retail trade.
- **Option 3: No change, keep the coca leaf with in Schedule I of the 1961 Single Convention.**

The outcomes of the coca review will then be presented to the CND, either at its 68th reconvened session in December 2025, or more likely, at its 69th regular session in March 2026. At this point, the 53 members of the CND²³ will vote on the ECDD recommendations – which will be either accepted or rejected, with a simple majority of CND members present and voting. The voting decision will then be communicated by the UN Secretary-General to all Member States, WHO and International Narcotics Control Board (INCB), and come into force on the date of receipt of the communication. The decision can be reviewed by ECOSOC on request within 90 days of receipt of the communication.²⁴

Aligning the UN drug control regime with human rights obligations

Coca and international human rights obligations

Coca has been used for millennia by several Native inhabitants in the Andean-Amazonian region for traditional, religious, ancestral and

Box 2 List of international legal instruments protecting the rights of Indigenous People

- Universal Declaration of Human Rights, 1948
- International Convention on the Elimination of Racial Discrimination, 1965
- International Covenant on Civil and Political Rights, 1966
- International Covenant on Economic Social and Cultural Rights, 1966
- UN Convention on the Illicit Traffic in Narcotic Drugs and Psychotropic Substances, 1988
- ILO Convention 169 - Indigenous and Tribal Peoples Convention, 1989
- UNESCO Convention for the Safeguarding of Intangible Cultural Heritage, 2003
- UN Declaration on the Rights of Indigenous People, 2007
- UN Convention on Biological Diversity, 1992, and Nagoya Protocol, 2010

medicinal purposes, and as a food supplement. In the 1960s, the inclusion of coca in the Single Convention had already caused great indignation in the Andean region. Today, the scheduling of coca in the drug control treaties and the ban on coca leaf chewing are at odds with various international legal instruments that protect the use of the plant as an expression of cultural norms and as a fundamental part of the traditional medicinal practices of some Indigenous People.²⁵

It is also important to underscore here that while coca chewing constitutes an important element of Indigenous traditions, especially among Quechua and Aymara speaking populations of the central Andes, the culture of using coca has diversified over the centuries, spreading among the general population and geographically into the northern Andes, the western Amazon basin and southwards into Chile and Argentina. Recent surveys estimate the number of people using coca in Peru at 6 million,²⁶ and over 3 million in Bolivia.²⁷ The plant is now used for a wide range of cultural and traditional purposes, including in religious ceremonies, for its medicinal properties, as a nutritional supplement, as an aid to collec-

tive exchange and discussions, and as a stimulant for work.²⁸ The review of the international status of the coca leaf would enable a broader range of people to benefit from the plant.

In addition, thousands of families depend on the cultivation of the coca bush for survival in the Andean-Amazonian region. Forced eradication campaigns, in particular in fragile ecosystems and Indigenous lands, have caused devastating harms for affected communities' rights to safe water, to food security, to health, and to a healthy environment.²⁹ Forced eradication efforts, weak land tenure rights, and the failure of alternative development programmes have led to the displacement of coca growing communities to more remote areas, further exacerbating cycles of poverty and marginalisation. It should be noted here that, often, the actual intrusion of settlers and the illegal expansion of coca cultivation in Indigenous Peoples' territories violate their sovereign right to their land. Enabling a legal regulated market for the coca leaf would facilitate the establishment of more protections for local communities' lands and rights, as well as ensure that the families that have traditionally engaged in coca cultivation can transition towards the legal market, breaking away from criminalisation, stigma, poverty and exclusion.

Finally, the fact that cocaine remains internationally scheduled means that its illegal production, trade and use remain prohibited. In many countries, the prohibition of cocaine has translated into severe criminal sanctions, including for use and possession for personal use, creating a strong deterrent for people who use cocaine from accessing the health and social services they may need. In this context, it is critical to ensure that all drug use and related activities (including in relation to cocaine) are decriminalised – as promoted in the UN System Common Positions on drugs³⁰ and on incarceration.³¹

Growing international support for coca de-scheduling

In 2009, the UNPFII recognised 'the cultural significance and medical importance of the coca leaf in the Andean and other indigenous regions

of South America'. Noting the discrepancies with the UN drug control treaties, the UNPFII recommended that 'those portions of the Convention regarding coca leaf chewing that are inconsistent with the rights of indigenous peoples to maintain their traditional health and cultural practices, as recognized in articles 11, 24 and 31 of the Declaration, be amended and/or repealed'.³²

In a similar fashion, former High Commissioner for Human Rights Zeid Ra'ad Al Hussein had criticised the weak language on Indigenous rights in the 2016 UNGASS Outcome Document as being 'ambiguous', concluding that 'it would have been better if it were clearly indicated that indigenous peoples should be allowed to use drugs in their traditional, cultural or religious practices when there is historical basis for this'.³³ In fact, the 2016 UNGASS represented one of the first attempts to negotiate language about Indigenous rights in an official UN drug control document. The UNGASS Outcome Document refers to 'traditional licit uses' and calls on Member States to take the UN Declaration on the Rights of Indigenous People (UNDRIP) 'into account'. However, text in the same paragraph undermines the whole point by adding 'in accordance with the three international drug control conventions' – an obvious contradiction in terms, as the Single Convention requires limiting the use of coca to medical and scientific purposes and abolishing coca chewing.

In its 2023 landmark report, the Office of the High Commissioner for Human Rights (OHCHR) recognised that 'the "war on drugs" approach was detrimental to public health, and perpetuated existing patterns of discrimination, including against... Indigenous Peoples'.³⁴ When presenting his report to the CND in March 2024, UN High Commissioner for Human Rights Volker Türk concluded that 'This review holds significant potential to revise drug policies for the better, with corresponding impact on the lives, livelihoods and ancestral traditions of Indigenous Peoples the world over'.³⁵

In addition to the UNPFII and OHCHR, the ECDD's critical review is receiving increasing support from a broad range of UN human rights entities and experts. On the occasion of World Drugs Day on 26 June 2024, 21 Special Procedure Mandates

welcomed the ‘initiatives by the World Health Organization’s Expert Committee on Drug Dependence to examine and address colonial legacies in relation to drug policy with a view to better protecting the rights of Indigenous Peoples, including in relation to ancestral, cultural, spiritual and religious practices’.³⁶

Drug-related resolutions adopted in various UN fora have also recently made welcome progress compared with the 2016 UNGASS in recognising the rights of Indigenous Peoples, including the alternative development resolution adopted at the UN Commission on Narcotic Drugs in Vienna in 2023.³⁷ In New York, the latest drugs ‘omnibus’ resolution, adopted by the General Assembly in 2022, includes the following paragraph:

*‘Reaffirming that Indigenous Peoples have the right to their traditional medicines and to maintain their health practices, including the conservation of their vital medicinal plants, animals and minerals, and that they also have the right of access, without any discrimination, to all social and health services and to participate in decision-making processes, in accordance with United Nations Declaration on the Rights of Indigenous Peoples’.*³⁸

Similar language was included in Resolution 52/24 at the Human Rights Council – bringing for the first time Indigenous Peoples’ rights at the centre of drug policy in Vienna, Geneva and New York alike.³⁹

Addressing fears over expanding cocaine markets and use

The international community has increasingly recognised the need to better align drug control and human rights obligations. In relation to the coca leaf, that alignment requires changing its current status under the 1961 Convention. At the same time, there are legitimate concerns about increased levels of cocaine use in recent years, and the rising incidence violence associated with the illegal cocaine market globally,⁴⁰ including in Europe.⁴¹

The fear that de-scheduling the coca leaf might

result in even greater cocaine availability in the European market and other regions, however, is unrealistic for a number of reasons – primary among them is the fact that existing treaty controls over coca cultivation and the use of the coca leaf for the illegal production of cocaine would remain in force. Removing the coca leaf from the schedules means it would no longer be considered as a ‘drug’ in the meaning of the Single Convention, and therefore the limitation to medical and scientific purposes – and many other treaty provisions – would no longer apply. But the coca bush and the coca leaf are also mentioned in specific treaty articles that require the continuation of certain control measures.

Article 26 of the 1961 Single Convention on Narcotic Drugs, for instance, would continue to require Parties that permit the cultivation of the coca bush for the production of natural coca leaf products, to apply the same control system as required for opium poppy. That system requires governments to designate specific areas where cultivation is allowed, licenses for cultivation and state controls over wholesale trade, import and export. Coca cultivation or trade in coca leaf destined for cocaine production, or any diversion from the legal coca market to the illegal market, would remain as illegal as it is today. A more comprehensive state regulation of legal coca markets could in fact make those administrative control measures more effective.

Parties would also continue to be bound by their obligations under **article 3.1 of the 1988 UN Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances**, according to which:

‘Each Party shall adopt such measures as may be necessary to establish as criminal offences under its domestic law, when committed intentionally: (a)... ii) The cultivation of opium poppy, coca bush or cannabis plant for the purpose of the production of narcotic drugs contrary to the provisions of the 1961 Convention and the 1961 Convention as amended’.

While this obligation from the 1988 Convention would no longer apply to cultivation for the purpose of natural coca leaf products – because



Aymara yatiri (shaman) performing a coca leaf reading on the summit of Mt. Uchumachi near Coroico, Bolivia on the winter solstice or Aymara New Year. Credit: Ali Margeaux Pfenninger

those would no longer be ‘narcotic drugs’ – it would remain in force for coca cultivation destined for cocaine production.

Furthermore, while the areas where coca could potentially be grown are already restricted by geographic and climate conditions,⁴² it should also be noted that large volumes of coca leaf are needed to produce cocaine. The UNODC recently estimated that one metric ton of fresh coca leaves were needed to produce 1.45 kg of cocaine of 80% purity.⁴³ Finally, the extraction of cocaine sulphate in the form of coca paste or cocaine base, and further refinement into cocaine hydrochloride require multiple chemicals and expertise.

For all these reasons, it is highly unlikely that removing the coca leaf from the 1961 Single Convention would have any impact on the overall scale of the illegal cocaine market. Fears that de-scheduling equals ending all international control measures, and that a legal international retail market in natural coca products could become a source of clandestine cocaine production, are entirely misplaced.

Conversely, de-scheduling the coca leaf – thereby allowing a milder stimulant on the market – may have potential benefits on the scale of the illegal cocaine market, by diverting some users away

from more hazardous concentrated products.

Finally, while it does not affect the rationale for de-scheduling the coca leaf or the probable results of achieving coca de-scheduling through the WHO critical review process, it is worth noting that illegal markets for cocaine have been vibrant, resilient and lucrative for decades, despite the fact that cocaine is itself listed in Schedule I of the 1961 Single Convention. The recent expansion of illegal cocaine markets has occurred fully within the framework enshrined in the UN drug treaty regime, a fact that points to systemic flaws in the prohibitionist approach itself.

Protecting the coca leaf as an Indigenous resource⁴⁴

Removing the coca leaf from the schedules of the 1961 Single Convention would allow the development of an international legal market for the plant. However, the globalisation of uses of the coca leaf from its original traditional niche to new cultural contexts and regions comes with many challenges, not least the risk of corporate capture (which has already been observed in the case of cannabis regulation), and the danger that traditional farmers and Indigenous Peoples will be sidelined from the newly regulated global market.

Speaking at a side event held at the 67th session of the CND, Bolivian Vice-President Choquehuanca presented two mechanisms to be considered in order to establish international legal protections of the coca leaf as a genetic resource and heritage of the Andean-Amazonian Indigenous Peoples.⁴⁵

The first mechanism is the **Nagoya Protocol of the Convention on Biological Diversity**.⁴⁶ Adopted in 2010, the Nagoya Protocol recognises that the benefits derived by users of genetic resources should be shared with those who provide them, with the ultimate objective being the conservation and sustainable use of biodiversity.⁴⁷ The Protocol includes specific provisions on the rights of Indigenous Peoples to sustainably use and benefit from the utilisation of their genetic resources, including plants. Article 10 of the Protocol in particular provides the option of ‘a global multilateral benefit-sharing mechanism to address the fair and equitable sharing of benefits derived from the utilisation of genetic resources and traditional knowledge associated with genetic resources that occur in transboundary situations’. Such a mechanism could apply to the coca leaf – as multiple Indigenous Peoples across the Andean-Amazonian region share long-standing traditional uses and knowledge.

The second mechanism relates to article 31 of the UN Declaration on the Rights of Indigenous Peoples, which protects the rights of Indigenous Peoples over their cultural heritage, traditional knowledge and traditional cultural expressions. Up until recently, the intellectual property regime established by the **World Intellectual Property Organization (WIPO)** did not recognise those rights; and in practice Indigenous Peoples have often faced exploitation, misuse, misappropriation and theft of their genetic resources and traditional knowledge. Positively, in May 2024, WIPO Member States adopted the Treaty on Intellectual Property, Genetic Resources and Associated Traditional Knowledge⁴⁸ – which for the first time includes provisions specifically protecting Indigenous Peoples and local communities. In 2023, at an Indigenous expert workshop aimed at contributing to the Treaty drafting process, participants had expressed hope that this instrument would ‘redress the discriminatory nature of the current intellectual property system’ by es-

tablishing ‘mechanisms to recognize rights of Indigenous Peoples over their intellectual property rights at the international level’.⁴⁹ Whether the Treaty successfully achieves this goal remains to be seen.⁵⁰ However, the international instrument imposes various requirements that may be useful in this regard by:

- Requiring patent applications where the intervention is based on traditional knowledge associated with genetic resources to disclose the country of origin and the Indigenous Peoples or local communities who provided the technical knowledge (article 3).
- Encouraging the establishment of information systems of traditional knowledge associated with genetic resources, in consultation with Indigenous Peoples and local communities when relevant (article 6)
- Mandating the signatories to hold an Assembly which encourages the ‘effective participation of representatives from Indigenous Peoples and local communities as accredited observers’ (article 10).⁵¹

Using the Nagoya Protocol and the WIPO Treaty on Intellectual Property, Genetic Resources and Associated Traditional Knowledge to protect the coca leaf as a genetic resource associated with traditional uses and knowledge would have a double objective. Firstly, this would prevent corporate capture of the newly legal international market for coca products by foreign commercial companies, prevent the approval of patents related to the coca leaf without prior informed consent by Indigenous Peoples, and ensure that a large part of the revenues contribute to the development of the Andean-Amazonian cross-border Native communities. Secondly, this protection mechanism would help to prevent the proliferation of cultivation and production of coca products without adequate control.⁵²

Conclusion and recommendations

Revising the classification of the coca leaf in the 1961 Single Convention on Narcotic Drugs would resolve long-standing legal inconsistencies and contradictions, address the colonial legacy and

biases permeating the international drug control system by ending the criminalisation of Indigenous, cultural and traditional practices associated with coca cultivation and use, and allow the international community to benefit from using the coca leaf in its natural form – while the provisions to control the illegal cultivation and use of coca for the production of cocaine would remain in place. IDPC therefore proposes the following recommendations:

- **We call on the WHO to correct the historical error of listing the coca leaf in the 1961 Single Convention on Narcotic Drugs.** This critical review should ensure that all scientific evidence is carefully assessed in relation to the properties of the coca leaf, an understanding of the traditional, religious, cultural and medicinal uses of the plant, its health effects (including its benefits), the low potential for dependence, and the fact that it does not meet the ‘ease of convertibility’ criterion. This review – and the elaboration of recommendations to the CND – should be conducted without undue political interference from Member States. Finally, the critical review should be an opportunity for the WHO to reflect on the problematic historical role they have themselves played in the scheduling of the coca leaf in the 1961 Convention, and explicitly distance themselves from past racist and colonial arguments made by WHO officials with regards to the plant.
- **The right of Indigenous Peoples to participate in decision-making** on matters that concern their cultural integrity is enshrined in the UN Declaration on the Rights of Indigenous Peoples, and is now recognised in drug-related resolutions adopted at the General Assembly, the CND and the Human Rights Council. We urge the ECDD to conduct its critical review of the coca leaf through a transparent and inclusive process, ensuring the meaningful involvement of Indigenous Peoples, and civil society more broadly, in its deliberations. We encourage the ECDD to consider the following suggestions:
 - * Invite Indigenous Peoples to participate in the critical review’s information collection phase
 - * Invite representatives of Indigenous Peoples to attend the 47th and 48th sessions of the ECDD, when the coca leaf will be discussed (not only the public hearings)
 - * Consider holding a special ECDD meeting to discuss the critical review report with Indigenous experts
 - * Solicit the advice of the UNPFII, the OHCHR Indigenous Peoples and Minorities Section, the Expert Mechanism and the Special Rapporteur on the Rights of Indigenous Peoples, the UN Committee on Economic, Social and Cultural Rights, the International Labour Organization and the WHO Global Centre for Traditional Medicine as part of the critical review process.
- **We urge the Member States that had objected to Bolivia’s reservation on the coca leaf, as it re-accessed the Single Convention in 2013, to withdraw such objections,**⁵³ as has now been done by Mexico (in 2018) and the Netherlands (in 2023).
- **We encourage Member States to initiate a much-needed discussion on the potential benefits of legal global market opportunities** for the coca leaf and its derived products, as well as on the possible mechanisms needed to avoid the risks of corporate capture and to protect the rights of Indigenous Peoples of the Andean-Amazonian region. We urge those countries with large traditional coca growing and consuming populations to address this potential change, favouring the livelihoods of those currently depending on this market.
- **We urge Member States to decriminalise all drug use and related activities (including in relation to cocaine)** to facilitate access to adequately funded harm reduction, drug dependence treatment and other health and social services for people who use drugs.

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to the Secretary-General to initiate the coca review, as well as the TNI/WOLA Coca Chronicles series. The advocacy note was drafted by Marie Nougier (IDPC), and received valuable inputs and contributions from the following reviewers: Ann Fordham and Juan Fernandez Ochoa (IDPC), Martin Jelsma and Pien Metaal (Transnational Institute), John Walsh (Washington Office on Latin America) and Ricardo Soberón.

Endnotes

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About this advocacy note

This IDPC advocacy note provides background information on the scheduling of the coca leaf in the international drug control treaties, outlines the ECDD coca review process, and makes the human rights case for the removal of the plant from the treaty schedules.

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About IDPC

The International Drug Policy Consortium is a global network of NGOs that come together to promote drug policies that advance social justice and human rights. IDPC's mission is to amplify and strengthen a diverse global movement to repair the harms caused by punitive drug policies, and to promote just responses.

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