Letter to the Editor

Adding a dedicated public health approach to the international drug control regime

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As the UN General Assembly Special Session 2016 on the World Drug Problem approaches, the usual consensus on policies to combat illicit drugs is breaching. Away from antagonist positions and debates on legalization versus more prohibition, we have decided to think collectively of a reform that effectively protects people's health and human rights, while being acceptable to the largest number of stakeholders. This letter addresses only the illicit substances treated under the international drug control framework, based on the three UN drug conventions, and not legal substances such as tobacco or alcohol.

In its preamble, the Single Convention on narcotic drugs,¹ dated 1961, lays out its reasoning for the establishment of a universal drug control system: the concern with the health and welfare of mankind; the recognition that the medical use of narcotic drugs continues to be indispensable for the relief of pain and suffering; that adequate provision must be made to ensure the availability of narcotic drugs for such purposes; and the recognition that addiction to narcotic drugs constitutes a serious danger for the individual and is fraught with social and economic dangers to mankind.

Through the political declaration dated 2009,² the work of the international community is based on three approaches: demand reduction,³ supply reduction, and enhancing international cooperation.⁴ Several issues have made member states at the Commission on Narcotic Drugs increasingly concerned about public health and safety: drug affected driving,⁵ ensuring access to essential medicines for pain relief, and international commitments to reducing HIV transmission in people who inject drugs.

Some parts of the Plan of Action (to counter the world drug problem) might be streamlined. We have designed (see below) a possible outline to be negotiated in 2019, based on the one adopted in 2009. We have added a public health approach to the international strategy on drugs as the new Part III (in italic).

Plan of Action on International Cooperation towards an Integrated and Balanced Strategy to Counter the World Drug Problem

Part I. Demand reduction and related measures

(i) Reducing drug abuse and dependence through a comprehensive approach

Part II. Supply Reduction and related measures

- (i) Reducing the illicit supply of drugs
- (ii) Control of precursors and of amphetamine-type stimulants
- (iii) Countering the illicit cultivation of crops used for the production of narcotic drugs and psychotropic substances and on alternative development through the enhancement of international cooperation (including measures to reduce violence and support communities affected by the cultivation, and trafficking of illicit crops)

Part III. Public health protection and related measures

- (i) Reducing the incidence of HIV/AIDS, hepatitis, and other bloodborne and infectious diseases
- (ii) Ensuring adequate availability of and access to essential medicines
- (iii) Reducing the consequences of drug abuse on health: overdoses; workplace injuries and traffic accidents; plus somatic and psychiatric disorders.

For each of the elements to be added under this new approach, following the consensus procedures of the Commission on Narcotic Drugs (CND), the current and future problems related to health and safety should be identified and the actions by member states negotiated.

Part IV. Countering money-laundering and promoting judicial cooperation to enhance international cooperation

- (i) Countering money-laundering
- (ii) Judicial cooperation

We suggest access to essential medicines as an element to be discussed while keeping in mind that the international drug control conventions require member states to ensure that adequate measures are taken to address drug abuse and illicit manufacture of and trafficking in illicit drugs at the national level (Part II), while at the same time ensuring that adequate supplies of drugs are available for medical and scientific use without them being diverted (new Part III).

To be acceptable to member states and other stakeholders, this new public health approach should not undermine the prevention, treatment, support, and rehabilitation efforts taken under demand reduction, but be a response to the health issues that do not fit in the general order of the other approaches. Finally, such an approach to drugs will shift the focus back to the global concern of health and welfare of mankind, the original goal of the international drug control regime.

References

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