


ECONOMIC AND SOCIAL COUNCIL
Forty-eighth Session
OFFICIAL RECORDS
*Monday, 23 March 1970,
at 10.50 a.m.*
NEW YORK

President: Mr. J. B. P. MARAMIS (Indonesia).

AGENDA ITEM 1
**Adoption of the agenda for the forty-eighth session
(E/4775 and Corr.1 and 2)**

1. The PRESIDENT invited the Council to adopt its agenda for its forty-eighth and resumed forty-eighth session (E/4775 and Corr.1 and 2).

2. Mr. KOTSCHNIG (United States of America) said that he thought the Council might not, for lack of information, be able to discuss item 3 (c) entitled "Review of the programmes and activities of the United Nations system of organizations for the development of tourism".

The agenda was adopted.

Organization of the work of the session (E/L.1300)

3. The PRESIDENT drew attention to a note by the Secretary-General on the organization of the work of the forty-eighth session (E/L.1300), which had been prepared, at the Council's request, after consultations with all delegations.

4. Mr. ZAKHAROV (Union of Soviet Socialist Republics) said that his delegation would prefer to discuss item 6 entitled "Mobilization of public opinion in developed and developing countries regarding the United Nations Development Decade", during the second week of meetings.

5. Mr. VIAUD (France) said that his delegation, in order to benefit from the advice of its experts who were now attending the concurrent session of the Commission on Human Rights, would prefer that the Council should discuss item 5, on narcotic drugs, during the second week.

6. Mr. FRANZI (Italy) supported the French suggestion. The Council could take up item 4 entitled "Report of the Population Commission", in place of item 5.

7. Mr. KOTSCHNIG (United States of America) reminded the Council that the proposals in the Secretary-General's note (E/L.1300) had already been agreed to by delegations. A change would entail considerable difficulties for those delegations which had made their preparations for the session on the basis of those proposals and would also impose unnecessary hardship and expense on the narcotics experts who had travelled from Europe precisely to be present in time for the scheduled discussion on narcotic drugs. In his view, the Council would do better to keep to the order proposed in the Secretary-General's note (E/L.1300).

8. Mr. HAMBRO (Norway) and Mr. ARAUJO CASTRO (Brazil) supported that view.

The proposals concerning the organization of the Council's work set forth in the Secretary-General's note (E/L.1300) were adopted.

9. Mr. KOTSCHNIG (United States of America) observed that there seemed to be no need to set up the Economic Committee since it would have only two items to discuss, one of which was a simple one on which no action was likely while the other had never before been dealt with by that Committee.

10. The PRESIDENT pointed out that the majority of representatives favoured setting up the Economic Committee.

AGENDA ITEM 5
Narcotic drugs:

- (a) Report of the Commission on Narcotic Drugs (E/4785 and Summary, E/4785/Add.1);
- (b) Report of the International Narcotics Control Board (E/4788 (Summary) and E/INCB/5);
- (c) Technical assistance in narcotics control (E/4789)

11. Mr. KUSEVIC (Director, Division of Narcotic Drugs), introducing the report of the Commission on Narcotic Drugs on its first special session (E/4785), said that the session had been held in compliance with Economic and Social Council resolution 1402 (XLVI) for the purpose of preparing a revised draft protocol on psychotropic substances, the urgency of which had been stressed by the General Assembly in resolution 2584 (XXIV). The Commission had been successful, and the text of the draft Protocol was to be found in chapter III of its report.

12. The increasing abuse of psychotropic substances created an obvious social problem which particularly affected the young. The international community was determined to stamp out not only the abuse itself but also the illicit traffic to which it gave rise. It believed that the supply of psychotropic substances should be strictly limited to licit needs and that action taken to combat abuse must be co-ordinated and universal to be effective. The question was how those principles could be put into practice. Recommendations to Governments were not sufficient because, even if strictly implemented, they had only limited results owing to a lack of liaison between Governments and the large number of persons, especially tourists, who crossed many international borders every year.

13. The Commission had therefore taken the position that what was necessary was an international treaty. The

substances covered by the draft Protocol differed greatly as to therapeutic value, quantity consumed, and danger. The draft Protocol covered the highly dangerous hallucinogens, such as LSD; stimulants, such as the amphetamines, whose use had assumed alarming proportions in some countries; and depressants of the central nervous system, such as the barbiturates, which were as harmful when abused as they were helpful when used properly.

14. The draft Protocol was designed to restrict as far as possible the use of hallucinogens to scientific research and to bring under control, with some flexibility, substances which were of value in medicine. The Commission, taking as its basic criterion the danger of a drug to society, had tried to reach agreement on a series of measures which would neither hamper scientific research nor tie the hands of doctors, but which would take account of the administrative difficulties for Governments caused by the increasing number of substances to be controlled.

15. The draft text therefore represented a series of compromises between differing and sometimes opposing positions. The guiding principles had been that it was better to have an imperfect treaty in force than a perfect treaty which was only a dead letter. On some important points the Commission had not been able to reach complete agreement; in such cases, the minority view had been recorded in a foot-note. It had also left the last two articles, on reservations and notifications, to be considered at the Conference which would be convened for the adoption of the Protocol. The substances to which the Protocol would apply were set out in the four provisional schedules annexed to the draft Protocol.

16. In addition to the Protocol, the report also contained three resolutions recommended by the Commission for action by the Council. The first was purely formal. The second recommended that the Council should decide to convene a conference of plenipotentiaries for the adoption of the Protocol on Psychotropic Substances. A minority in the Commission had felt that the Council should decide how the Protocol was to be adopted; in his view, however, the subject was too technical to be decided by the Council. The third resolution, reflecting the urgency of the problem, recommended that Governments should give consideration to the adoption at the earliest possible date of additional measures for the national as well as the international control of psychotropic substances, and take measures to prevent the abuse of those substances.

17. Despite difficulties, there were grounds for optimism that the international community would adopt the draft Protocol on Psychotropic Substances. If it did, it would soon have available to it a strong yet flexible instrument acceptable to all States. However, the adoption of the instrument would not mean that the problem had been solved. The epidemic increase in the abuse of traditional narcotics, in particular the deadly heroin, was so great that all possible efforts must be made to check it and stamp it out. Many countries could be said to be suffering from mass drug addiction so great as to constitute a veritable national disaster; but no region, no State, could claim to be immune from that evil. The international community must act, and act quickly; it must, moreover, have adequate financial resources at its disposal. If it delayed, the problem would

become infinitely more difficult, if not impossible, to solve and the cost of a solution would be incomparably higher.

18. Sir Harry GREENFIELD (President, International Narcotics Control Board) said that anyone conversant with the narcotic drugs situation would agree that the sombre note on which the previous speaker had concluded his statement was entirely justified.

19. The report which he was introducing to the Council was the second report of the International Narcotics Control Board and related to its work during 1969 (E/INCB/5). It reflected the views of the Board as a whole and its form had been decided upon after exhaustive debate among all its members. The Council would undoubtedly recognize in the report an expression of mature thinking based on a thorough appreciation of the problem of drug abuse in all its aspects.

20. Like all similar organs set up since 1929, the Board had developed an individual character: it was well balanced, it was conscious of the weight of its growing responsibilities, and it had evolved a creative outlook towards the constantly changing activities which it supervised.

21. The Board's relationship with WHO and the Commission on Narcotic Drugs was now probably closer than ever before. The advantages which such a relationship could have for the success of international narcotics control could hardly be overestimated. In particular, there was constant co-operation between the respective secretariats, with the result that the President of the Board, and hence the other members, were kept in continuous and immediate touch with all significant developments in the narcotics field.

22. The Board's first concern was to ensure that it received as much as possible of the statistical and other information which Contracting Parties were required to provide under the relevant treaties and that the information was as accurate as possible. It was only on the basis of ample, dependable and timely information that the Board could satisfactorily fulfil its important responsibility for surveying and reporting on the production, distribution and consumption of narcotic substances and for co-ordinating the operation of the international control system. The Board gratefully acknowledged that over the years there had been a steady improvement in the accuracy, completeness and promptitude of governmental reporting under existing treaties. Even so, there were still considerable deficiencies which detracted from the effectiveness of the international system as a whole. The Board therefore hoped that the Council would endorse its view that the system could succeed only if all national administrations could be brought to a reasonable standard of efficiency and if all countries recognized that whole-hearted co-operation in the system was an obligation they owed to the international community.

23. The Board spent much time and effort in guiding national administrations on technical problems and helping them to overcome difficulties in complying with the provisions of the treaties. That was done mainly through correspondence and periodic seminars, which were organized in conjunction with the Division on Narcotic Drugs and had been so arranged as to cover groups of neighbour-

ing countries which had similar problems. In 1969 joint training missions of that type had been highly successful in Africa, and similar missions to other areas were contemplated. Year by year the Board's information network became more efficient, but there were still large areas of the world, notably Central Asia, of which the Board knew little or nothing. It hoped that that serious lacuna in the international system could eventually be remedied.

24. Much the same could be said of the application of the controls prescribed by the treaties. More than half the Members of the United Nations had ratified the Single Convention on Narcotic Drugs, 1953,¹ and a far greater number applied its provisions with a satisfactory degree of fidelity. Thus, subject to the reservations which he had just mentioned, the international control over licit manufacture and licit distribution of the drugs listed in the 1953 Convention was reasonably secure. That allowed the Board more time to address itself to specific problems, which arose with considerable frequency and were sometimes formidable.

25. A similar assurance could not, unfortunately, be given with regard to the licit production of narcotic raw materials. Monopoly controls over opium production in India and the Soviet Union, the main areas of production for licit manufacture, were highly effective but the same could not yet be said for controls in Turkey. However, useful modifications had been made in recent years, and if the Turkish Government carried through its programme for reducing the cultivated area to 12,000 hectares in the current year and concentrating production in districts remote from the frontiers, the situation should be substantially improved.

26. Following the Iranian Government's decision to rescind its ban on poppy cultivation, Iran was once again among the licit producers of opium, although it firmly disclaimed any intention of permitting production on the scale prior to 1955. Indeed, it appeared to be the Government's intention to confine production strictly to domestic requirements, and traffickers were being dealt with severely. If the situation in Iran was to be contained, the Government's policy must be comprehensive: it must include not only strict control over production and distribution, together with harsh penalties for offenders, but also widespread publicity on the dangers of drug abuse, and medical or para-medical treatment and social rehabilitation of addicts. The last need had been rendered more urgent by the fact that opium addiction was being replaced by heroin addiction, particularly among young people. Such a programme would be an onerous one for a country with Iran's limited resources and the Board hoped that international assistance would be forthcoming if the Iranian Government felt the need for it.

27. Of much greater concern to the Board was the illicit or uncontrolled production of narcotic raw materials. That problem had preoccupied the Board and its predecessors for many years, because, however serious the leakages from licit production, it was always possible, by joint endeavour, to bring about a gradual reduction of the area of cultivation and a tightening of controls. That was what had, in fact, happened, although the pace of improvement could well

have been quicker. But the almost unlimited reserve of raw materials afforded by illicit and uncontrolled production constituted a permanent threat to whatever might be achieved in the realm of licit production. Hitherto that threat had been a relatively distant one but it had now become more immediate. Not only had new regions become more readily accessible, but the primary raw materials, whether opium or coca leaf, were now often partly processed in the production areas, with the result that they were more easily and economically portable and less readily identifiable as contraband. Those and other factors had greatly extended the sources of supply available to traffickers and made them more easily accessible. Thus mankind could not hope to be free from the evil of narcotic drug abuse—quite apart from the menace of other dangerous drugs—until all production of narcotic raw materials which was now illicit or uncontrolled was eliminated and all licit production was placed under control systems of maximum efficiency.

28. With that aim in mind, the Board had for several years pressed for the adoption of a comprehensive programme of economic and social advancement in areas whose inhabitants depended for their livelihood on the production of opium and coca leaves which supplied the international contraband channels. There now seemed to be some prospect that a plan devised along those lines might be put into effect. The meeting of the international organs and specialized agencies concerned, which had been convened in June 1969 to consider ways and means of implementing General Assembly resolution 2434 (XXIII), had been a useful first step. The decision to deal consecutively with the regions affected was perhaps inevitable, although it carried the obvious risk, as the Board had indicated earlier, that success in a given region might simply lead to increased production in another. However, the agreement that the measures to be taken should simultaneously embrace all the main constituent elements—supply, demand and traffic—and should include integrated rural development, as well as educational and enforcement measures, had been welcomed by the Board, for it saw in that agreement some hope that a fundamental approach to the problem might now be possible. However, the approach must be whole-hearted and should not be allowed to falter for lack of funds; the international community must somehow find means of financing and implementing those measures before the situation became unmanageable. The Board supported the suggestion that a special fund might be created for that purpose. There was abundant evidence that the problem was now even more serious than before and that there was a desperate need for realistic and effective measures. The greater the delay in taking action, the higher would be the cost, not only of the financing of remedial measures, but also in terms of human misery and economic loss. The urgency was heightened by the fact that opium addicts were increasingly turning to heroin, the most dangerous form of addiction. That tendency was manifesting itself not only in Iran but also in Thailand, where the addiction problem was now recognized as acute. The Thai Government had recently appealed for technical assistance under General Assembly resolution 2434 (XXIII) and the Board hoped that the appeal would be heeded.

29. The main areas of large-scale illicit or uncontrolled production were known: for opium they were the Middle

¹ United Nations publication, Sales No.: E.62.XI.1.

East and South-East Asia; for coca leaf they were the Andean regions of South America; cannabis was freely available in Latin America, Asia and Africa, and an additional source of supply seemed now to have opened up in Nepal.

30. The Board had long taken a serious view of the cannabis problem and it shared the opinion of the WHO Expert Committee on Drug Dependence that the growing misuse of cannabis constituted a menace to society and the individual. The physiological effects of long-term misuse were known and, while research into the psychiatric effects was needed, it could hardly be doubted that prolonged misuse undermined man's inborn urge to improve the lot of himself and his family. There seemed also to be general agreement that even mild doses disturbed the individual's sense of time and space—a fact which, especially in the age of the automobile, was of relevance to the current debate on whether cannabis consumption should be legalized. The debate seemed to be clouded by lack of understanding arising from the fact that much of the cannabis consumed by new adherents to the cult was of inferior quality so that its effects were relatively mild. The potency of cannabis varied depending on several factors, including the part of the plant from which it was taken, the degree of care given to its cultivation, and its treatment and storage. Actually, it was in the resin that the active principle of cannabis was chiefly concentrated.

31. The dangers involved in cannabis consumption would doubtless continue to be explored in the countries chiefly affected. What was of more immediate concern to the Board was the fact that cannabis smoking had become a group practice, particularly among the younger generation. That was an important factor because the admission of a young person to such a group constituted an introduction to drug abuse. The groups themselves not only encouraged experimentation with other drugs but almost inevitably became channels of supply. Individual members first sought quantities sufficient for themselves and their friends, but then discovered in that commerce a means of personal profit and proceeded to organize supplies, which often amounted to as much as 100 kilogrammes at a time. Such groups of young people could thus facilitate and even encourage individual recourse to more serious forms of drug abuse.

32. The Board had for several years been concerned over the growing recourse to substances affecting the central nervous system—stimulants, depressants and hallucinogens—which had now reached almost epidemic proportions. Taken as a whole, the continually expanding family of psychotropic substances represented a potential danger transcending even that of the principal opiates. The Board had accordingly devoted the whole of the concluding chapter of its report to that subject and had expressed its concern at the new development.

33. The Board had participated in the special session of the Commission on Narcotic Drugs in January and in the studies which had preceded the preparation of the draft Protocol on Psychotropic Substances. It hoped that the draft Protocol would now be adopted and would be implemented with all possible speed.

34. If the draft Protocol was ratified in its present form, the Board would, of course, carry out the duties assigned to it therein with the same care and diligence as had characterized its work under the earlier treaties. There was an obvious parallel between the present situation and the one which had obtained in the late 1920s, when international narcotics treaties had first begun to come into force. The Board had long been conscious of that parallel and felt there were grounds for hope that control over the licit manufacture of psychotropic substances could perhaps fairly soon be made as efficacious as that which had been established over the licit manufacture of narcotic substances. For the proper fulfilment of its enlarged responsibilities the Board would have to be strengthened, in terms of both expertise and secretariat personnel, in all the relevant disciplines—administrative, economic, legal, sociological and medical.

35. The world was faced with a grave and growing problem which could be solved only by collective effort. The pattern of drug abuse was now changing with almost startling rapidity, and while in some countries the misuse of drugs was not yet a major social danger, the problem was undoubtedly growing in intensity and was causing mounting general anxiety. The public throughout the world was entitled to look to the relevant international organs for assurance that the challenge was being met. One way in which the Council could help to allay public anxiety would be to enable representatives of Governments to meet not less than once a year—whether in the Commission on Narcotic Drugs or in some other forum—to study the situation continuously and to formulate remedial measures with the minimum delay.

36. Mr. CAMERON (World Health Organization) said that since 1957 WHO, through its expert committees and in several resolutions of the World Health Assembly, had been striving to make the national and international organs concerned with the control of dependence-producing drugs aware of the need for national and international measures of control in respect of certain categories of drugs that were not covered by the existing international narcotics control conventions. The World Health Assembly, in its resolution WHA21.42, had expressed its deep concern at the continuing and spreading problem posed by the abuse of psychotropic substances not under international control and had expressed the view that agreement should be reached as quickly as possible on effective international control provisions.

37. The Director-General of WHO had informed the Secretary-General that the agency was prepared to evaluate, for the purpose of international control measures, the risk to public health presented by the abuse of psychotropic substances and that it was understood that the administrative and legal provisions by which the results of such evaluation would be given effect would still have to be worked out in consultation with WHO.

38. The agency had been consulted throughout the preparation of the draft Protocol contained in the report of the first special session of the Commission on Narcotic Drugs. WHO had maintained that its functions and responsibilities under the proposed Protocol should, at the least, be of the same nature and extent as those laid down in the Single

Convention on Narcotic Drugs of 1961, which provided that the Commission on Narcotic Drugs might take decisions on the control status of a drug "in accordance with the recommendation of the World Health Organization". The World Health Assembly, in its resolution WHA18.46, had authorized the Director-General to "continue to forward to the Secretary-General of the United Nations such notifications as WHO is called upon to make under the Single Convention". The recommendations in question thus represented a formal action taken by WHO in conformity with the latest international narcotics control instrument in force.

39. By virtue of its Constitution, a function of WHO was "to act as the directing and co-ordinating authority on international health work". It was evident from article 2 (4) of the revised draft Protocol now under discussion that the decision on the control status of a drug was first and foremost a matter of medical assessment. If the Commission on Narcotic Drugs wished to act on a specific recommendation by WHO, it should not deviate from the control provisions specified in that recommendation. The comments which WHO intended to submit in consequence of resolution B as set forth in chapter IV of the report of

the first special session of the Commission on Narcotic Drugs, should it be adopted by the Council, would conform to the principles he had just outlined.

40. Mr. OSANYA-NYYNEQUE (Kenya) requested that the statement by the President of the International Narcotics Control Board should be circulated as an official document of the Council.

41. Mr. KASSUM (Secretary of the Council) announced that the financial implications of the request made by the Kenyan representative would amount to between \$1,200 and \$1,500.

42. Mr. FRANZI (Italy) suggested that, in view of the interest of delegations in the important statement by the President of the International Narcotics Control Board, the summary of the statement in the record of the meeting should be more detailed than usual.

43. Mr. OSANYA-NYYNEQUE (Kenya) agreed.

The meeting rose at 12.5 p.m.