Joint Statement at the second intersessional meeting of the 63rd session of the Commission on Narcotic Drugs on the WHO/ECDD recommendations on cannabis and related substances

Vienna, 8 October 2020

On behalf of the People’s Democratic Republic of Algeria, the Republic of Angola, the Republic of Belarus, Burkina Faso, the People’s Republic of China, the Republic of Cuba, the Arab Republic of Egypt, the Republic of Indonesia, the Islamic Republic of Iran, the Republic of Iraq, the Republic of Kenya, the Kyrgyz Republic, Libya, the Republic of Namibia, the Federal Republic of Nigeria, the Islamic Republic of Pakistan, the State of Palestine, the Republic of the Philippines, the Russian Federation, the Republic of Singapore, the Democratic Socialist Republic of Sri Lanka, the Syrian Arab Republic, the Republic of Tajikistan, the Republic of Turkey, Turkmenistan, the Bolivarian Republic of Venezuela

We commend the wise decision of the CND as proposed by the Chair in March 2020 to postpone the voting on the six recommendations of the WHO Expert Committee on Drug Dependence on the scheduling of cannabis and cannabis-related substances under the 1961 Single Convention on Narcotic Drugs as amended by the 1972 Protocol and the 1971 Convention on Psychotropic Substances and to arrange comprehensive expert level discussions in the Commission on these recommendations.

The three rounds of topical meetings provided a platform for Member States to exchange views on and better understand the legal, social, economic, administrative and other implications of the recommendations as well as the measures to address them. We appreciate the contributions of the WHO, the UNODC and the INCB to the expert deliberations and providing answers to the questions posed by Member States.

For the past 60 years, the international drug control system has been effective in addressing the illicit production of and trafficking in cannabis and cannabis-substances. And although some Member States face serious challenges in controlling the emerging cannabis-related products, we believe our focus should be on helping Member States effectively implement the drug control conventions. A decision to change the existing scheduling system for cannabis and its related substances may
be read as the Commission finding that these substances are no longer regarded as harmful to health, in sharp contrast to what was envisaged by the drafters of the drug control conventions.

While the conventions may have been drafted more than fifty years ago, they still remain relevant today. The current global situation with regard to cannabis abuse and trafficking does not support the loosening of regulations and controls for cannabis and its related substances. According to the World Drug Report 2020, cannabis remains the most abused drug in the world with 192 million users globally. The UNODC expresses concerns arising from the increasing proliferation of cannabis products with a high THC content and from the fact that the cannabis products currently available are often more harmful than the cannabis herb and resin available a couple of decades ago, which leads to adverse public health consequences in many countries, especially for the youth. The Lancet report released in March 2019 provides solid evidence of the harmful effects on mental health caused by the consumption of high-potency cannabis. Conversely, there is limited robust evidence that justifies any changes to the scheduling system for cannabis and its related substances. Therefore, it would be prudent not to make any changes to the scheduling of cannabis and its related substances until there is robust scientific evidence to justify the changes.

There may be potential therapeutic value of some cannabis-based preparations with established clinical evidence of efficacy to treat specific health conditions. However, we believe that the current scheduling of cannabis and its related substances provides sufficient flexibility to allow adequate access to these substances for medical and scientific purposes, including at the level of international trade. We share the view of the INCB and the WHO that it is not appropriate to speak about availability of cannabis-based medicines for therapeutic purposes in the absence of universally accepted medical and health standards and prescribing practices for such medicines.

The topical meetings revealed that there is a lot of uncertainty on the scope and implementability of some of the WHO/ECDD recommendations. Hence, their
adoption by the Commission will lead to confusion and loosening of the established international regulatory framework for cannabis and its related substances. The matter will be further complicated by the fact that competent authorities of many countries will lack the necessary detection, testing, monitoring and enforcement capabilities to implement the recommendations.

Moreover, the international drug control conventions and the drug control regime they established, are meant to work in harmony with the national legal frameworks of Member States. It remains unclear what legal implications the recommendations on cannabis and its related substances may have on the current legislative frameworks of many Member States, particularly in cases where the recommendations may contradict existing national legislation.

We are ready to engage in close consultations with the UNODC, the INCB and the WHO on how to streamline and strengthen the reporting mechanism on the legitimate cultivation, production of and trade in cannabis and its related substances for medical and scientific use of these substances.

The WHO/ECDD recommendations on cannabis and cannabis-related substances were made long before the COVID-19 pandemic was experienced. It should be kept in mind that this new situation would have implications on food security and agriculture. Increasing the cannabis production will have a negative effect on reducing hunger and poverty.

We encourage the CND Member States to very carefully consider their voting positions. The Conventions continue to serve us well. They provide certainty and clarity. We should allow these Conventions to continue to serve their purpose of protecting the health and welfare of mankind.