



PalliativeCare
AUSTRALIA

*His Excellency General the
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Hurley AC DSC (Retd),
Governor-General of the
Commonwealth of
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Statement by the International Association for Hospice and Palliative Care (IAHPC) in association with Palliative Care Australia (PCA), for the thematic intersessional of the Commission on Narcotic Drugs; Access to Controlled Medicines. 21st October, 2020.

IAHPC along with Palliative Care Australia (PCA) thanks the CND for organizing this intersessional meeting on the thematic area of access to internationally controlled essential medicines and for including representation of civil society organizations working on this essential global health issue. In the context of the COVID_19 pandemic, the rising global burden of non-communicable diseases, and population aging, all which present health systems with both tremendous challenges and opportunities, we urge member states to comply with the most recent directives of the International Narcotics Control Board. These include the [March circular](#) to national competent authorities and the [August Joint Statement](#) with UNODC and WHO to ensure adequate access to internationally controlled essential medicines, many of which are included in the WHO Model List, Section 2, for Palliative Care.

Non-governmental organizations in consultative status with the UN ECOSOC such as the IAHPC have been working for years with CND, UNODC, and the UNODC to raise awareness about lack of access to essential medicines listed in the schedules of the international drug control conventions. This work bore fruit in [Chapter Two of the UNGASS Outcome Document](#), the INCB Supplements to the [2015](#) and [2018](#) Annual Reports, and most recently in CND Resolutions [62/5](#) and [63/5](#).

The most prominent of the barriers cited by INCB in its reports to CND is lack of appropriate training by health personnel in opioid prescribing and use for palliative care, obstetrics, chronic pain management, mental health, and substance use disorder treatment. Member states can overcome this barrier to access by collaborating with national palliative care organizations such as PCA who do this work in the public, private, and charitable sectors, relieving the serious health related suffering of patients and families.

In the Australian context, this has been realized by 12 peak health bodies, coming together in a [position statement](#) to support 8 initiatives to guide policy and regulations and address barriers, ensuring sustainable access to prescription opioids for those with palliative care needs now and into the future.

IAHPCs global membership is committed to collaborating with CND, UNODC and INCB to assist member states in implementation of multilateral commitments under the international drug



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control conventions, the human rights conventions, the Astana Declaration of 2018, the High Level Declaration on Universal Health Coverage, and the 2030 Sustainable Development by improving access to internationally controlled essential medicines. We thank you.

Kind regards

Ms. Kate Reed
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Kind regards

Dr. Katherine Pettus
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