UNGASS, Pain campaign and IDHDP

In April, the United Nations will host a General Assembly Special Session on Drugs (UNGASS), the most significant high-level international drug policy event in almost two decades will take place. The world will come together to talk about drugs. IDHDP has been working towards this meeting for the last 3 years and will be there to add our voice. We, like many others are calling for health, along with human rights to be center stage in the international drug control regime.

The UN shapes international drug policy and current UN drug treaties maintain that the health and welfare of people is their primary objective, but it is clear that this cannot be achieved if governments continue to criminalize, stigmatize, penalize and incarcerate people who use drugs. We must demand evidence-based drug policies based on health and people.

There can now be no doubt that in a multitude of attempts to stop people using illicit drugs – the poorest, most marginalised and most stigmatised groups have suffered dreadful consequences. Whether it is incarcerations in the USA, deaths in Mexico, preventable drug-related deaths or HIV and HCV transmission in the Russian Federation and a other Commonwealth of Independent States countries for the most part those who suffer most will be from the bottom of the economic pile. These have become known as the unintended consequences. IDHDP believes they are in fact the consequences of health having been allocated such a tiny proportion of the available resources to address the world's drug problem.

You will have seen from the last newsletter that IDHDP is focusing on one area of campaign particularly – that of the inequality of availability of analgesia, especially morphine and how the international drug control system to prevent the misuse of drugs like heroin appears to have contributed strongly in preventing access to opioid analgesics and creating an unnecessary atmosphere of fear when it comes to the prescribing/dispensing of these drugs for the treatment of pain. This in spite of the fact that member states are obliged to ensure controlled medicines are made available and any restriction of access constitutes a violation of the right to health.

This has contributed to a situation where 80% of the world's population, has very little or no access to opioid analgesics, particularly morphine for the treatment of pain. This leaves huge numbers of people suffering intolerable pain whether dying of cancer, with end-stage AIDS and other terminal illnesses, accidents with acute pain, women in labour and having complications in childbirth, wounded victims of war torn areas or many other situations that bring about severe pain. Doctors are being prevented from being able to do their job by this lack of access to essential, evidence-based and effective medicines.

In what can only be described as a disgraceful contrast – the richest 20% of the world's population consumes almost all of the morphine and has managed easily to

develop systems to ensure proper access to opioid analgesics for all when it comes to the relief of severe pain.

If there were one thing that could come out of UNGASS 2016 – it would be a completely unambiguous statement from the UN that every member state should:

- 1. Ensure that their efforts to stop the misuse of drugs like heroin should in no way interfere with their obligation to ensure the delivery of opioid analysesics to all patients who need it.
- 2. To prioritize the removal of any other obstructions preventing people in their country from receiving opioid analysesics when necessary.
- 3. Introduce training programmes for all clinicians in the treatment of pain.
- 4. Introduce public information programmes informing its citizens of their basic human right to have access to opioids for pain relief when they need it.

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