

Implementing Resolution 53/4: The Role of Civil Society

In March 2010 the Commission on Narcotic Drugs (CND) unanimously approved Resolution 53/4¹ expressing concern that access to opioid based medications is “non-existent or almost non-existent in many countries and regions of the world”. The CND stressed that “international drug control conventions seek to achieve balance by ensuring adequate availability of controlled medicines for medical and scientific purposes while preventing diversion and abuse” and requested member states to take the necessary measures to ensure their populations have “adequate access to opioid based medications, to be in line with the drug control conventions” to which they are signatories of.

The Civil Society and the United Nations

Civil Society Organizations (CSOs) helped found the United Nations (UN), and Article 71 of the United Nations Charter provides for consultations and collaboration with NGOs². The UN Millennium Development Goals emphasize increasing partnerships of the UN with CSOs³. The UN system maintains formal associations with a number and variety of major NGOs, organizes and hosts briefings, meetings and conferences for NGO representatives who are accredited to UN offices, programmes and agencies.

Studies have shown that the participation of Civil Society in the development and implementation of regulations, resolutions and programs, result in improved partnerships with government and other Non for profit organizations (NGOs), increased capacity and better quality of care⁴.

Role of the Civil Society

The civil society can play a significant role in the improvement of the quality of the lives of the individuals it serves and is a part of. In the implementation of Resolution 53/4, CSOs may help member states in different ways, including:

Legislation and Norms:

- Providing advice to governments and law makers on the obligations of the international drug Conventions.
- Assisting in the process of reviewing national laws and regulations to identify undue restrictions which impede legitimate access and ways to eliminate them
- Facilitating the dialogue between the civil society and government representatives

Procurement and distribution:

- Assisting the National Competent Authority to identify populations, regions and institutions with unmet medical and scientific needs for controlled medications
- Providing information on suppliers of low-cost oral morphine or Active Pharmaceutical Ingredient (API) to governments
- Assisting institutions in understanding how to procure, manage and dispense controlled medications to patients

Appropriate medical and scientific use:

- Developing treatment guidelines on the medical and scientific use of controlled medications
- Educating and training healthcare providers in the rational use of controlled medicines and how to prevent diversion under the Conventions

Monitoring:

- Monitoring and providing information on consumption of controlled medications
- Monitoring and providing information on national policies that go beyond the control measures in the Single Convention

¹ <http://www.unodc.org/unodc/en/commissions/CND/09-resolutions.html>

² UN. Charter of the United Nations. Available in <http://www.un.org/aboutun/charter/index.shtml>

³ UN. Strategies for the Millenium Development Goals. Available in <http://www.undp.org/mdg/strategy.shtml>

⁴ Morris C. My Global Fund Forum. Available in <http://myglobalfund.org/forums/p/1686/5186.aspx>

Networking:

- Developing international and regional networks of support with organizations and individuals interested in the matter

Generating awareness and informing:

- Providing information to the general public
- Developing and implementing advocacy campaigns to generate and increase awareness among the general public about the need to ensure safe and effective access to controlled medications

Examples of CSOs which may help member States in the implementation of Resolution 53/4 include:

At the International/Regional Level:

- Access to Medicines Program, Public Health Program, Open Society Foundations <http://www.soros.org/initiatives/health/focus/access>
- AIDS Projects Management Group <http://www.aidsprojects.com/>
- Drug Control and Access to Medicines Consortium (DCAM) <http://www.dcamconsortium.net/>
- Humans Rights Watch (HRW) <http://www.hrw.org/>
- Global Drug Policy Programme, Open Society Foundations <http://www.soros.org/initiatives/drugpolicy>
- International Association for Hospice and Palliative Care (IAHPC) www.hospicecare.com
- International Association for the Study of Pain (IASP) www.iasp-pain.org
- International Harm Reduction Association (IHRA) <http://www.ihra.net/>
- International Network for Cancer Treatment and Research (INCTR) <http://www.inctr.org/>
- International Palliative Care Initiative, Public Health Program, Open Society Foundations <http://www.soros.org/initiatives/health/focus/ipci>
- International Union Against Cancer (UICC) – Global Access to Pain Relief Initiative (GAPRI) www.uicc.org/programmes/gapri
- Pain and Policy Studies Group (PPSG) - WHO Collaborating Centre for Pain Policy and Palliative Care <http://www.painpolicy.wisc.edu/>
- Regional Palliative Care Organizations:
 - Asociación Latinoamericana de Cuidados Paliativos (ALCP) <http://cuidadospaliativos.org/>
 - Asia Pacific Hospice Network (APHN) <http://aphn.org/>
 - African Palliative Care Association (APCA) <http://apca.org.uk/>
 - European Association for Palliative Care (EAPC) <http://www.eapcnet.eu/>
- Worldwide Palliative Care Alliance (WPCA) www.thewpca.org

At the National Level:

- Academia – Universities
- National Cancer Institutes
- HIV/AIDS groups
- National palliative care and pain associations/organizations
- Patient groups
- Professional Review Boards

This document was prepared by the International Association for Hospice and Palliative Care (IAHPC) for the 54th session of the Commission on Narcotic Drugs (CND), on behalf of the organizations listed above.