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**UNDERSTANDING UN DRUG CONTROL SCHEDULING RECOMMENDATIONS, INCLUDING LINKAGES AMONG AND IMPACT
ON NATIONAL, REGIONAL AND INTERNATIONAL AGENCIES**



Government
of Canada

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Understanding UN drug control scheduling recommendations, including linkages among and impact on national, regional and international agencies

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Legal Status of Schedules?

- Integral to UN drug treaty framework:
 - Defined in the 1961 & 1971 Conventions (art. 1(u)/art. 1(g))
 - Specify drugs, substances, preparations, etc., subject to measures of control in the Conventions
 - Essential to give effect to the provisions of the Conventions
- Unique for the Conventions in benefitting from a simplified treaty amending procedure, with roles for the WHO, CND, States Parties.

Key Elements of WHO (ECDD) role in Scheduling: 1961 & 1971 Conventions

1961 Convention

Assess & make recommendations as to whether:

- **Drugs & substances** are “liable to abuse and productive of similar effects as substances in Schedule I or II OR convertible into a drug
- **Drugs in Schedule I** are “particularly liable to abuse and to produce ill effects & such liability is not offset by substantial therapeutic advantages not possessed by substances other than drugs in Schedule IV”
- **Preparations** are “not liable to abuse & cannot produce ill effects ... & drug therein is not readily recoverable”

1971 Convention

Assess & make recommendations as to whether:

- **Drugs & substances** can result in:
 - (i) dependence and central nervous system stimulation or depression
 - (ii) similar abuse & similar ill effects as a substance in Schedule I, II, III or IV, AND
Sufficient evidence the substance is / is likely to be abused & constitute a public health & social problem warranting international control
- Role in assessing **preparations** containing substances in schedule I

Role of CND in Scheduling: 1961 and 1971 Conventions

- Consider WHO findings & recommendations
 - Determinative on medical / scientific matters (*explicit in 1971 C., art. 2(5)*)
 - Seek additional information (*explicit in 1971 C., art. 2(5)*)
 - Consider other relevant factors (economic, legal, administrative, etc.) (*same*)
- Make scheduling decisions
 - 1961 Convention: In accordance with WHO recommendations (*art. 3(3)(iii), art. 3(4 – 6)*)
 - 1971 Convention: Discretion to decide (*art. 2(5-6), art. 3(4)*)
- Beyond scheduling, full range of treaty functions (e.g. Art. 8, 1961 C.)

Examples of States Parties' Roles in Scheduling: 1961 and 1971 Conventions

- Share relevant information with UNSG (e.g. art. 3(1), 1961 C., art. 2(1), 1971 C.)
- Assess domestic health, safety, policy, legal implications, etc.
- Implement scheduling decisions, including domestic legal and regulatory controls (e.g. art. 3(7) 1961 C., art. 2(7), 1971 C.)
- Treaty interpretation

Treaty & legal review of WHO ECDD

Recommendations: Some considerations

- Consistency with WHO mandate and criteria in 1961, 1971 Conventions
- Alignment with international law principles
 - *Vienna Convention on Law of Treaties* or customary international law, general principles, etc.
- Related considerations