

## Improving availability of internationally controlled essential medicines under right to health

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G2H2 POLICY DEBATE

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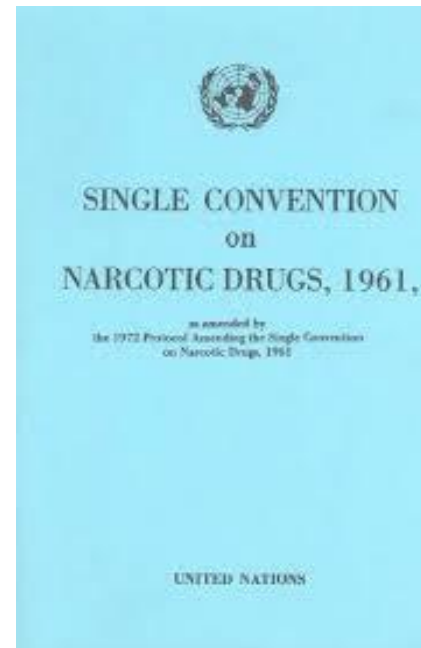


IAHPC: A world free from health-related suffering

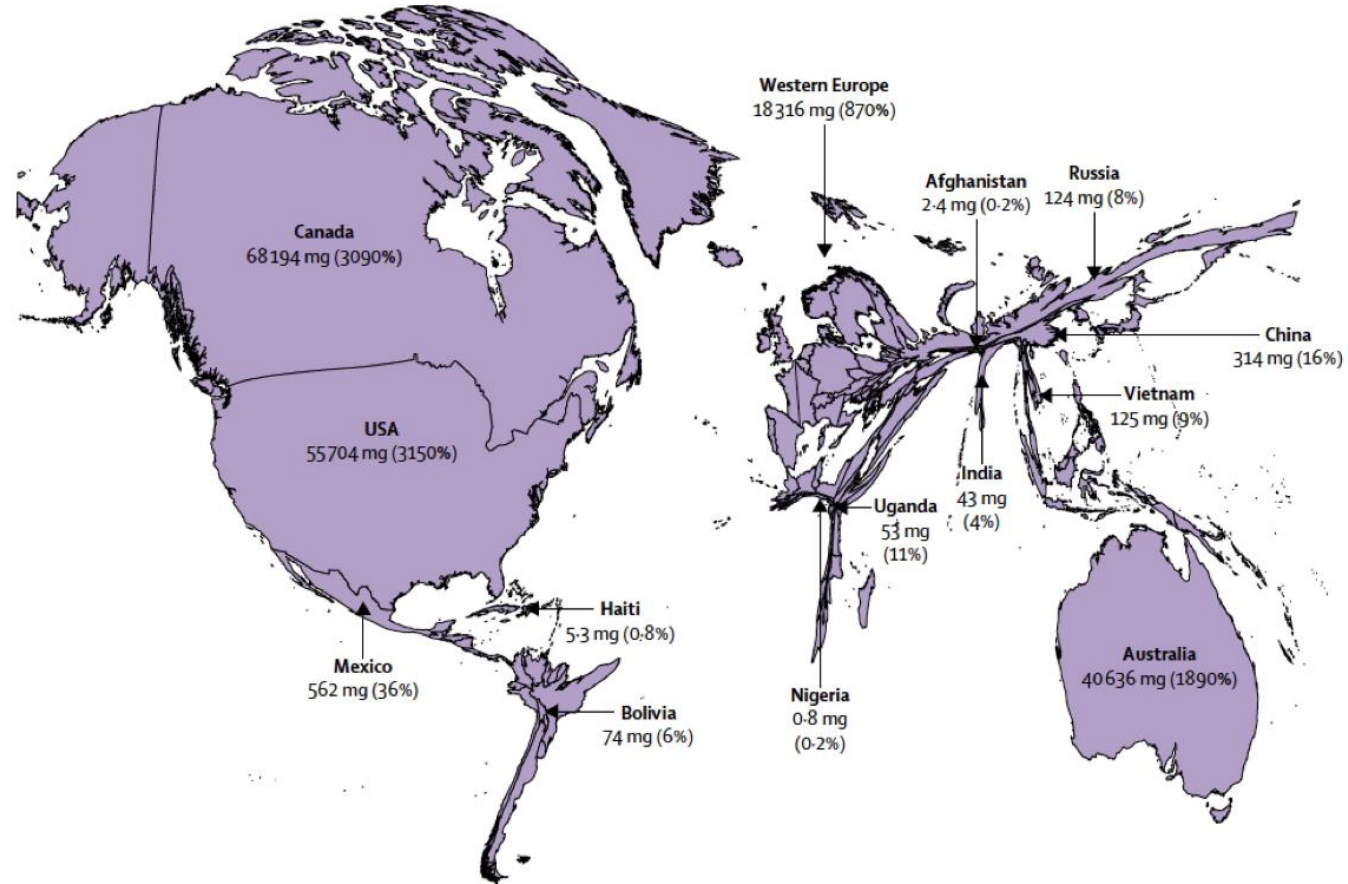


# “Internationally controlled essential medicines”

- Tension between two domains of international law: drug policy & global health
- Int'l drug control conventions list core PC meds in the “schedules”
- WHO Model List includes same in section 2 “Palliative Care Medicines”



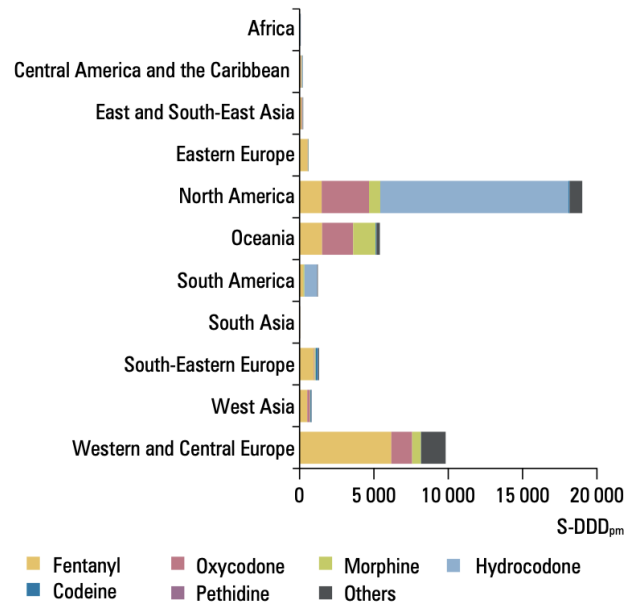
# Global unmet need



**Figure 1.** Map of access to distributed opioid morphine-equivalent (DOME); Numbers indicate morphine in mg/patient in need of palliative care, average 2010–13, and estimated percentage of need that is met for the health conditions most associated with serious health-related suffering.

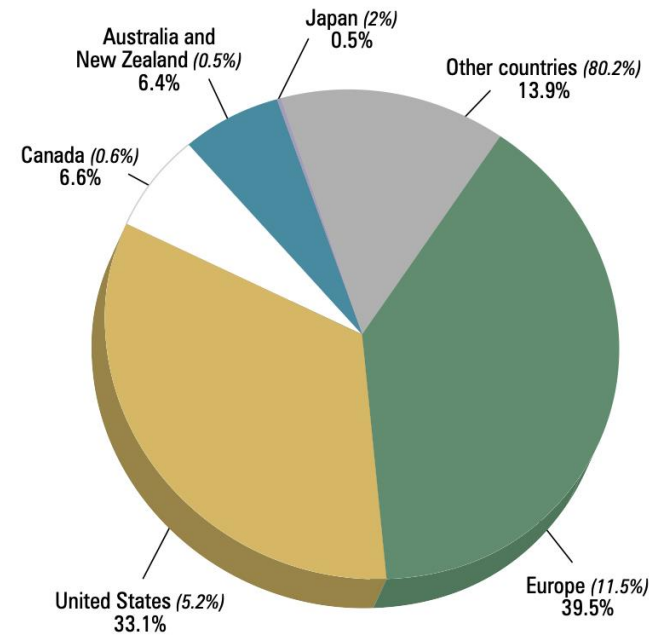
# Global distribution of pain relief meds

Figure III. Consumption of codeine,<sup>a</sup> fentanyl, hydrocodone, morphine, oxycodone, pethidine and other opioids, all regions, expressed in S-DDD<sub>pm</sub>, 2022



<sup>a</sup>Only codeine used directly for pain relief is considered. Codeine used for preparations included in Schedule III is excluded.

Figure V. Morphine: distribution of consumption in relation to the share of the world population, 2022



Note: Percentages in parentheses refer to share of the total population of all reporting countries worldwide.

# Applicable human rights framework

- CESCR
  - Right to the highest attainable standard of physical and mental health
  - General comment 14
- CAT
  - Rights to be free from torture, cruel treatment, neglect
  - Special rapporteur reports (Manfred Nowak and Juan E. Méndez)
- Children, PWD
- Older persons, Interamerican Convention on rights of older persons

# Applicable normative framework

- International drug policy conventions “indispensable”
- WHA 67/19 -- First agreed language on PC
- UNGA omnibus drug resolutions
- Commission on Narcotic Drugs
  - UNGASS Outcome Document 2016
  - Ministerial Declaration 2023
  - Multiple resolutions
  - Reports of International Narcotics Control Board

# Challenges to adequate availability

- Single Convention not self-executing (requires national implementation)
  - National laws and regulations date back to mid-C20 before palliative & addiction medicine
  - Multiple administrative barriers caused by ignorance of conventions
- Lack of trained health workforce... path dependent opioid phobia
- Restricted supplies & high prices owing to artificially low demand
- US public health crisis
- No agreed language in international normative framework until last decade
- Lack of funding to implement enabling normative framework



# Overcome challenges



Ensure good governance— balance rational availability with prevention, promotion, and harm reduction programs (primary care)



Build an interdisciplinary educational advocacy movement



Share evidence and stories (“lived experience”)



Engage with faith and solidarity

Thank you Dianova, G2H2,  
and all colleagues working to create a more equitable world

A teal-colored curved graphic element is located in the bottom right corner of the slide, curving upwards and to the left.

# References

- INCB Supplement to the annual report of the Board for 2022 on the availability of. internationally controlled substances “No Patient Left Behind: Progress in Ensuring Adequate Access to Internationally Controlled Substances for Medical and Scientific Purposes.” 2023
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