

NATIONS UNIES ORGANE INTERNATIONAL DE CONTRÔLE DES STUPÉFIANTS

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Economic and Social Council Management Segment

Item 20 (d): Narcotic Drugs Report of the International Narcotics Control Board

New York, 10 June 2025

Distinguished Vice-President, Excellencies, Ladies and Gentlemen,

It is an honour to present the 2024 Annual Report of the International Narcotics Control Board.

I thank the Council for entrusting the Board to support Member States in safeguarding health and welfare through monitoring and promoting full implementation of the three international drug control conventions, which remain among the most-widely ratified United Nations treaties, benefitting from nearuniversal adherence.

The thematic chapter of the 2024 Annual Report focuses on the rapid expansion of the illicit synthetic drug industry and the major threat this poses to public health globally. While all regions are affected, some regions, such as Africa, are particularly challenged as treatment and rehabilitation resources are already very limited. INCB is calling for a comprehensive, coordinated strategy to address the illicit manufacture, trafficking and consumption of synthetic drugs. INCB's precursor control and GRIDS programmes are supporting Governments in preventing and measurably reducing the illicit manufacture and trafficking of drugs. In 2024, INCB assessed two fentanyl precursors and 16 precursors of amphetamine-type stimulants and recommended their international control. Through INCB's PEN Online system, we monitored nearly 28,000 licit shipments of 32,000 tons and 5 billion litres of internationally controlled precursor chemicals. INCB also tracked the licit shipment of more than 136,000 tons and more than 3 million litres of internationally non-controlled precursor chemicals through the PEN Online Light system. Use of the INCB PICS system prevented the diversion of 2,600 tons and 500,000 litres of precursor chemicals to illicit drug manufacture.

Under the INCB GRIDS Programme, nearly 25,000 incidents in 160 countries involving 850 unique new psychoactive substances were processed through the IONICS system, bringing the total number of events recorded to over 100,000. 45 events were conducted for 1,300 officials to coordinate operational responses through GRIDS regional technical officers based around the world.

To ensure the supply of narcotic drugs and psychotropic substances for medical and scientific purposes, in 2024 INCB reviewed and approved or established over 4,000 estimates for more than 1,500 tons of narcotic drugs used in anaesthesia, pain management and opioid agonist therapy and over 4,500 annual assessments and modifications were processed for more than 2,500 tons of psychotropic substances used in the treatment of neurological and mental health conditions and opioid agonist therapy.

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While there are persistent disparities between regions in the consumption of opioid analgesics for use in anaesthesia and the treatment of pain and the consumption of several psychotropic substances for the treatment of mental and neurological conditions and substance use disorders, there are promising signs of progress. Yet significant concerns remain for Africa, South Asia, and Central America and the Caribbean. Almost all consumption of opioid analgesics continues to be concentrated in Western Europe, North America, and Oceania.

Another critical issue is the availability of controlled substances for the treatment of opioid use disorder. About ten percent of people with opioid use disorder have access to opioid agonist therapy. In some countries with a high prevalence of people who inject drugs, access to methadone, buprenorphine, and opioid agonist therapy services remains limited — or is even non-existent.

Ensuring access to internationally controlled substances during humanitarian emergencies, including situations resulting from armed conflict, is essential. The conventions provide for the expedited movement of such substances during emergencies and INCB urges countries to make full use of these provisions.

I will briefly mention two recommendations that I have not yet touched upon.

Firstly, INCB reiterates that measures legalizing the nonmedical use of internationally controlled substances are contrary to the provisions of the international drug control conventions. Secondly, INCB urges Governments to give due consideration to:

- the right to health, including availability of controlled medicines;
- the right to access to evidence-based prevention, treatment, rehabilitation and social reintegration services; and
- the principle of proportionality in criminal justice responses to drug-related offences.

INCB is proud of the achievements made together with Member States. The mechanisms in place are fine examples of multilateralism at work and treaties being translated into action for the benefit of all.

However, these efforts are dependent upon sustained resources. The continuing regular budget liquidity crisis faced by the United Nations Secretariat is already affected the work of INCB, with for example the INCB 142nd session not taking place in person and critical country missions postponed.

The lack of reliable regular budgetary resources has the potential to compromise the Board's ability to approve and process estimates and assessments for hundreds of tons of narcotic drugs and psychotropic substances used in anaesthesia, pain management, opioid agonist therapy and for the treatment of neurological and mental health conditions, with all the potentially very negative consequences for patients worldwide. Likewise, stable extrabudgetary resources are crucial to ensure the continued activities of the precursor control and GRIDS programmes.

On behalf of the Boad, I reconfirm INCB's commitment to supporting the Council and Member States in fulfilling the provisions of the treaties and achieving their overarching objective of safeguarding health and welfare. However, INCB's ability to do so is dependent upon being entrusted with sufficient resources.

Thank you.