

WORLD HEALTH ORGANIZATION

FORTY-EIGHTH WORLD HEALTH ASSEMBLY

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SUMMARY RECORDS AND REPORTS OF COMMITTEES

Global study on cocaine use

Mr. BOYER (United States of America) drew attention to a WHO press package that had been released in March 1995 to announce a global study on cocaine use undertaken jointly by WHO and the United Nations Interregional Crime and Justice Research Institute. The United States Government had been surprised to note that the package seemed to make a case for the positive uses of cocaine, claiming that use of the coca leaf did not lead to noticeable damage to mental or physical health, that the positive health effects of coca leaf chewing might be transferable from traditional settings to other countries and cultures, and that coca production provided financial benefits to peasants.

Although his country reaffirmed its support for WHO's work on the scheduling of narcotic and psychotropic substances under international conventions, it took the view that the study on cocaine, evidence of WHO's support for harm-reduction programmes and previous WHO association with organizations that supported the legalization of drugs, indicated that its programme on substance abuse was heading in the wrong direction. The press package undermined the efforts of the international community to stamp out the illegal cultivation and production of coca, inter alia through international conventions.

The United States Government considered that, if WHO activities relating to drugs failed to reinforce proven drug control approaches, funds for the relevant programmes should be curtailed. In view of the gravity of the matter, he asked the Director-General for an assurance that WHO would dissociate itself from the conclusions of the study and that, in substance abuse activities, an approach would not be adopted that could be used to justify the continued production of coca.

In reply, Dr PIEL (Cabinet of the Director-General) said that the cocaine study was an important and objective analysis by experts using data collected in a large number of countries. It represented the views of the experts, whereas WHO's continuing policy was to uphold the scheduling under the international conventions on narcotic drugs and psychoactive substances. Consequently, WHO was making its position clear, and because of the wording of the study, which could lead to misunderstanding, was not intending to publish the report as such. It would be looking into the matter carefully.

Mr. BOYER (United States of America) took issue with Dr Piel's characterization of the cocaine study as an important and objective analysis. The study was not in conformity with WHO's basic and rigorous standards on the conduct of research projects, and he hoped that some way could be found for it to undergo a peer review by people recognized as genuine experts in research, and in conformity with WHO's rigid research procedures.

Dr PIEL (Cabinet of the Director-General) said that that was one of the options the Organization would be considering.

Environmental health

Mr. VAN KEENEN (Netherlands) said that, although the Organization had made a good start in the field of environment and health, document A48/INF.DOC./3 did not take sufficient account of other aspects of sustainable development, e.g., poverty alleviation, population and the development of primary health care, all of which were dealt with in Agenda 21.

Dr KREISEL (Office of Global and Integrated Environmental Health) replied that WHO had been designated as the task manager of chapter 6 of Agenda 21, which embraced primary health care but not population and poverty alleviation, which were to be found in other chapters and whose task managers were other entities of the United Nations system. WHO had taken up those matters at the last meeting of the Commission on Sustainable Development, and would be including them in its report in preparation for the follow-up conference to the United Nations Conference on Environment and Development, to be held in 1997. Discussions had begun, involving the Division of Intensified Cooperation with Countries and other WHO programmes, on links between poverty, environmental health and population issues, and the objective was for a coherent WHO policy on the outcomes of the International Conference on Population and