**The Right to Science and Freedom of Research With Controlled Substances**

Policy Statement, *Multidisciplinary Association for Psychedelic Studies (MAPS)*

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Article 15 of the International Covenant on Economic, Social and Cultural Rights recognizes the right of everyone to "enjoy the benefits of scientific progress and its applications" and demand that states "respect the freedom indispensable for scientific research and creative activity," stating that "the steps to be taken by [States]… to achieve the full realization of this right shall include those necessary for the conservation, the development and the diffusion of science and culture.

The unscientific scheduling and criminalization of Schedule I substances creates obstructive and unnecessary barriers to research, preventing millions of people from accessing essential, life-saving medicines. These barriers including lack of public funding due to stigma, compounded by the ongoing criminalization of users. Instead of continuing to enact and perpetuate policies that undermine scientists’ abilities to conduct research, states ought to actively fund, promote, and protect unbiased research into Schedule I substances. States should ensure regulated access to controlled substances for medical and scientific purposes.

Despite these barriers, the Multidisciplinary Association for Psychedelic Studies (MAPS) sponsors research into Schedule I substance-assisted treatments, including MDMA-assisted psychotherapy for Post-Traumatic Stress Disorder (PSTD), MDMA-assisted psychotherapy for social anxiety in adults with autism, cannabis for PTSD, and ibogaine-assisted therapy for opioid use disorder. After incredibly successful Phase II research, the US Food & Drug Administration (FDA) granted MDMA-assisted psychotherapy for PTSD Breakthrough Therapy Designation, and MAPS anticipates FDA approval of MDMA in 2021. MAPS has sponsored research throughout the United States, Canada, Israel, Brazil, Mexico, U.K., New Zealand, Spain, Switzerland, and is planning studies Colombia, Chile, and throughout Europe. MAPS is also sponsoring Phase II trials of smoked whole-plant cannabis for PTSD in veterans in the United States.

Cannabis is essential medicine and its ongoing criminalization is a prime example of how criminalization undermines the right to science.The World Health Organization (WHO) has recommended the removal of tetrahydrocannabidinol (THC) from Schedule I, citing its widely documented medical uses and low abuse potential. In December 2017, WHO stated that cannabis compound cannabidiol (CBD) not be internationally scheduled as a controlled substance. In June 2018, the WHO expert committee began a comprehensive review of cannabis and cannabis-related substances. The final part of the critical review will occur at the 41st Expert Committee on Drug Dependence in November 2018, where WHO is likely to issue recommendations for changing the scheduling status of cannabis, cannabis resin, and cannabis extracts and tinctures.

Drug policy and drug scheduling should be grounded by science and research, and informed by harm reduction and public health.The stated goal of the international system of drug control is “the protection of the health and welfare of humankind.” However, neither the ONDCP nor the Commission on Narcotic Drugs has evolved their positions in light of ongoing demonstrable evidence from clinical, scientific, or medical research communities to adequately assess public health. Conversely, the international drug control mechanism has wreaked devastating impacts upon global public health by treating drugs and drug use as criminal issues, and by criminalizing people who use drugs. As the policy-making body of the UNODC, the Commission on Narcotic Drugs cannot continue to ignore WHO’s research-based scheduling recommendations. The CESCR ought to support moving UN drug policy away from criminalization and toward science.