FORUM: World Health Assembly (WHA)

QUESTION OF: Measures to Combat Illicit Opioid Trafficking in the Global Opioids Crisis

MAIN SUBMITTER: United Kingdom

CO-SUBMITTERS: Canada, China, Dominica Republic, India, Indonesia, Japan, Laos, Niger, Pakistan, Republic of Korea, Sweden, United States, Ukraine

WORLD HEALTH ASSEMBLY,

*Defining* the term “opioids” as compounds that are extracted from the poppy plant (Papaver somniferum) as well as semisynthetic and synthetic compounds with similar properties that can interact with opioid receptors in the brain,

*Noting* their non-medical use, prolonged use, misuse and use without medical supervision can lead to opioid dependence and other health problems such as coma, permanent brain damage, or death, concerning to public health, social stability, and economic productivity,

*Recognizing* the severeness of opioid misuse worldwide, with an estimated 60.4 million people engaging in non-medical opioid use globally in 2021, as reported by the United Nations Office on Drugs and Crime (UNODC),

*Cognizant* of the presence of Naloxone, an opioid antagonist medication proven to provide essential life support for overdose patients during emergencies and not inflict pain on people who did not consume opioids,

*Acknowledging* the efforts of the United Nations Office on Drugs and Crime (UNODC), World Health Organization (WHO), and other international organizations in addressing drug abuse,

*Emphasizing* the urgent need to allow over-the-top (OTC) usage of naloxone, allowing commercial usage without prescription from clinicians,

*Further recognizing* that in 2022, 1,466 kg of cocaine were seized in Mali, Chad, Burkina Faso, and Niger, a significant increase from the average of 13 kg between 2013 and 2020, highlighting the growing challenge of illicit drug trafficking in the region, as reported by the United Nations Office on Drugs and Crime (UNODC),

1. Invites all Member Nations and relevant organizations such as United Nations Office on Drugs and Crime (UNODC) and International Criminal police Organization (INTERPOL) to promote raising awareness of the severity of opioid trafficking and its misuse, as a way of encouraging concentration of attention and efforts towards this topic and calling for further international actions, through ways such as but not limited to:
	1. Utilizing digital platforms to make non-profit public campaigns and informational videos or posts, mostly targeting citizens in MEDCs, to help achieve comprehensive understanding on its severity, such as but not limited to:
		1. Collaborating with influencers to amplify the message,
		2. Instagram campaigns using hashtags,
		3. Testimonials from individuals affected by the opioid crisis to humanize the issue,
		4. Data and statistics illustrating the scale of the crisis and its impact on communities,
	2. Employing non-digital platforms in public places such as public community center, mostly targeting LEDCs, to spread the severeness of opioid trafficking, in such ways but not limited to:
		1. Brochures,
		2. Newspapers,
		3. Billboard ads;
2. Urges member states to develop legal frameworks that take punitive measures against drug dealers and illegal drug producers while simultaneously protecting vulnerable populations of victims and through such ways but not limited to:
	1. Penalizing illegal sales, shares, and consumptions of opioids through:
		1. Charging homicide charges for DIH (drug-induced-homicide) crimes to deter distribution of illicit substances by holding drug dealers accountable for the crime,
		2. Charging drug possession depending on the type and amount,
		3. Charging unauthorized produce of illegal opioids,
	2. Implementing Good Samaritan Law, which protects people who seek help during overdose to encourage witnesses and drug abusers to freely call for medical assistance by removing the liability of reporters through:
		1. Exempting individuals who sought emergency help from overdose-related charges,
		2. Excusing individuals who provided naloxone or other lifesaving medicine from legal liability even when they inadvertently caused harm,
		3. Protecting clinicians who assisted out of the hospital in emergencies,
	3. Establishing clear standard of circumstances under which DIH charges can be applied and circumstances under which Good Samaritan laws can be applied through such ways but not limited to:
		1. Good Samaritan laws focusing on low-level drug abuse: usage of illegal opioids without intent to harm others or possession of small amounts of opioids,
		2. DIH laws focusing on high-level-drug abuse: drug trafficking or distribution,
	4. Encouraging member states to implement strict regulations on prescribing and distributing opioids for clinical purpose through imposing such obligations but not limited to:
		1. Monitoring obligation for prescription practices, such as keeping track of patient’s recovery process, to prevent misuse,
		2. Regular audits of pharmacies and medical facilities to ensure they align to such regulations;
3. Calls upon all member states and organizations such as World Health Organization (WHO) and National Institute on Drug Abuse (NIDA) to provide compulsory free education on the chemical and biological mechanisms by which opioids affect the human body and a way to differentiate between legal and illegal forms of opioids with its potential harms, through such ways but not limited to:
	1. Holding educational sessions aiming on teenagers addressing basic knowledge about opioid and the correct use, in such ways but not limited to:
		1. Inviting healthcare professionals to provide education,
		2. Hosting a special session where celebrities who have experienced opioid misuse to share the downs from their own experiences,
	2. Creating educational videos and short documentaries from the official government and public healthcare organizations that deals with opioid addiction and aftermath such as but not limited to:
		1. The appropriate dosage of opioids,
		2. Illicit types of opioids that are not used with a medical purpose,
	3. Educational program targeting the public for reaching hotlines in their district and utilizing emergency toolkit:
		1. Creating a map indicating Naloxone availability,
		2. Free workshop programs training the community on how to use Naloxone during emergency;
4. Calls for the United Nations Office on Drugs and Crime (UNODC) to establish comprehensive standards and guidelines that can be referred to by all member states when implementing policies and ensure countries are appropriately adopting policies that align with their conventions through;
	1. Collaborating with regional and international entities;
		1. Calling the World Health Organization (WHO) to develop guidelines for prescribing opioids and treating overdose patients during clinical practices,
		2. Calling for the International Narcotics Control Board (INCB) to set standardized regulatory guidelines for monitoring and audits,
		3. Calling for International Crime Police Organizations (INTERPOL) to establish guidelines for border control,
		4. Calling for the National Institute on Drug Abuse (NIDA) to set guidelines for education on drug misuse,
	2. Underlining UNODC’s role in merging and compromising overlapping policies from various organizations to create more precise and standardized international guidelines,
		1. Undergoing review processes before publishing such guidelines,
		2. Organizing regular conferences with regional and international organizations to amend such guidelines,
	3. Conducting a regular evaluation of countries’ policies to check whether they align with the UN toolkit on Synthetic Drugs, launched in 2021,
		1. Requiring member states to provide regular reports on their policies,
		2. Collaborating with Supreme Audit Institutions that are responsible for transnational government auditing,
	4. Calling for international cooperation in monitoring and regulating pharmaceutical companies by:
		1. Establishing stricter guidelines on the production and distribution of opioids,
		2. Implementing transparent reporting systems for pharmaceutical sales to track potential abuse,
		3. Encouraging countries to share data on opioid prescriptions and misuse to identify trends and hotspots of trafficking;
5. Encourages the member states and organizations such as World Customs Organization (WCO), UN Commission on Narcotic Drugs (UNCND), and International Criminal Police Organization (INTERPOL) to implement and enforce strict regulations on opioid trafficking to enhance foreign policy, border security, and criminal justice and strengthen international law enforcement operations to disrupt trafficking in such ways but not limited to:
	1. Multinational operational support to seize major drug trafficking,
		1. Surveillance to intercept maritime drug trafficking,
		2. IT support to deter online illegal sales of opioids,
		3. Deploying personnel and military officers for strategic anti-trafficking operations to prohibit illicit trade of all types of opioids at land and maritime ports of entry,
		4. Targeting the drug cartel and any relevant communities involved in the illegal trafficking of opioids with strict trade sanctions so that the key choke points in opioid production are disturbed, and these actors are prevented from accessing to financial systems at state and international level,
	2. Sharing expertise and creating a database of illegal opioid trafficking,
		1. Sending criminal alerts to member states to arrest criminals when they enter their dominion when one member country requests assistance,
		2. Establishing a 24/7 communication network between polices,
		3. Creating a mass database encompassing all detailed information on drug trafficking available for all member state,
	3. Inaugurating training and capacity-building programs of police worldwide to equip them with skills to combat opioid trafficking:
		1. Educating border patrol to correctly detect criminals through case studies of suspected behavior and various trading patterns,
		2. Training police to effectively plan and execute operations targeting drug trafficking through simulating crime scenes,
		3. Instructing border patrol on how to safe-handle opioids,
		4. Equipping professionals with forensic techniques to confirm the presence and type of drugs,
		5. Equipping professionals with IT technology to access the online black market as a means to collect data and disrupt the network of opioid trafficking,
	4. Encouraging the national governments to enforce strict border security solutions at both national and international level including but not limited to:
		1. urging governments to train more sniffer dog to detect illegal drug trafficking in public places such as airport and train station,
		2. cooperating with the postal service in each nation to utilize appropriate technologies to intercept illicit opioids under strict control, ensuring that these opioids are not traded and sold at both national and international level;
6. Urges member states to create affordable and accessible medication services that efficiently assist overdose patients to withdraw from illegal drug use, especially targeting those in rural communities through such ways but not limited to;
	1. Increasing access to Medication-Assisted Treatment (MAT), which prescribes patients FDA-approved medications (Buprenorphine, Methadone, and Naltrexone) to help patients overcome their dependence on opioids:
		1. Simplifying training program for MAT prescribers,
		2. Including MAT medication in all healthcare insurance,
		3. Allowing pharmacists to prescribe particular types of MAT drug which has a small risk of misuse,
	2. Increasing Naloxone availability and accessibility,
		1. Approving Naloxone to be obtained over the counter (OTC) without prescription,
		2. Government subsidies for Naloxone producers to increase supply,
		3. Including Naloxone in all healthcare insurance,
	3. Governments of member states and NGOs preventing drug abuse and accelerate the withdrawal process through incorporating affordable mental health care support including:
		1. Expansion of public recovery centers that provide affordable psychotherapy options for overdose patients,
		2. Counseling or behavioral therapy when the patient also seems to have co-occurring mental health disorders;
7. Expresses its hope for governments of member states to take measures to curb illegal drug cultivation and manufacturing, majorly due to poverty, by boosting rural area’s economy through such interventions but not limited to:
	1. Providing subsidies for rural farmers who inevitably participate in illegal crop cultivation due to poverty,
		1. Providing direct payment,
		2. Insurance payment during natural disasters,
		3. Gradually decreasing subsidies when farmers become self-sufficient and to prevent over-dependency on government funds,
	2. Tariffs imposed for imported agricultural products to benefit domestic farmers,
		1. Tariff rate quotas (TRQs), which allows products to be entered into the market at a lower tariff rate in certain periods,
		2. Consistently analyzing the market system to ensure tariffs are not oppressing the rural economy,
	3. Setting agricultural price floor, which is set above the equilibrium price to benefit producers by ensuring they receive at least the minimum amount of profit necessary to maintain their livelihood,
		1. Regularly relocating the price floor according to the rising prices,
		2. Analyzing the market system to ensure the price floor is set above the equilibrium price;
8. Proclaims the United Nations and relevant organizations, such as The World Bank and the International Monetary Fund (IMF) to actively provide member states with all necessary assistance to effectively mitigate opioid trafficking and its misuse, through such ways but not limited to:
	1. Encouraging all governments from member states to increase funding and cooperation with intergovernmental organizations:
		1. Investing in the economic development and employment in LEDCs where the opioids production provides job opportunities so that low-income class can stop relying on the illegal opioid trafficking,
		2. Investing in research and projects for developing new treatments to combat the urgent issue of opioid use,
		3. Supporting homeless youth who are easily exposed to drug uses with appropriate employment and housing to help stabilize their lives,
		4. Investing in scanning technologies at all ports of entry,
	2. Strengthening commitment to essential healthcare system and other health determinants, from the General health Assembly, WHO, with tasks including but not limited:
		1. Collaborating with public health researchers, statisticians, doctors, and other pertinent experts,
		2. Developing a framework of the provision of technical and financial support towards member states who have filed a request,
		3. Providing mental healthcare support with qualified healthcare professionals for people suffering from opioid use disorder and their families affected by the opioid crisis, to prevent the suicidal risks due to opioid overuse,
		4. Government funding to consistently supply sufficient amounts of Naloxone in healthcare facilities.