

HAMUN 44

UNODC

Topic A:

Legal Remedies to Curb the Use of  
Opiate Medications Like Fentanyl



### **Committee Background:**

The United Nations Office on Drugs and Crime was established in 1997 in hopes to prevent the growth and increase trading, use, and abuse of drugs and crime throughout the world. It does so through many important conventions such as the ‘United Nations Convention Against Corruption (UNCAC)’ and the, ‘United Nations Convention Against Transnational Organized Crime (UNTOC).’ It is imperative to understand the binding legal frameworks the UNODC hopes to and already has implemented in order to combat structural drug trades and the rise of terrorism. Both of these issues are directly related to today's topic of the evolving role of narcoterrorism throughout the globe.

There have been several significant legally binding frameworks that the UNODC was built off from. Frameworks such as the 1988 Convention against the Illicit Traffic in Narcotic Drugs and Psychotropic Substances, 1971 Convention on Psychotropic Substances, and the 1961 Single Convention on Narcotic Drugs led to the rising need of a committee specifically designed to combat these issues which led to the formation of the UNODC.<sup>1</sup>

### **Statement of the Problem:**

The abuse of and addiction to opioids is a crisis primarily affecting countries in the global north. To give you a scope of the issue. About 275 million people worldwide (5.6 per cent of the global population aged 15–64 years) used drugs at least once during 2016. Among them, there were about 34 million people who used opioids and about 19 million who used opiates. Opioids are common substances in pain killers. However, they are highly addictive, so given inappropriate doses, many patients go on to consume non-prescription drugs, such as heroine. In 2016, there were an estimated 27 million people who suffered from opioid use disorders. The majority of people dependent on opioids used illicitly cultivated and manufactured heroin, but an increasing proportion used prescription opioids. The particularly devastating aspect of the opioid crisis is that only 10% of the people who need treatment, which is actually quite effective at treating dependence, are receiving it. This is due to both the nature of addiction and low capacity health sectors. Interestingly, opioid production actually contributes greatly to some countries’ GDP while opioid consumption causes inefficiencies which result in losses in other countries’ GDP.<sup>2</sup>

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<sup>1</sup> Nancy.cao, "United Nations Office on Drugs and Crime," Integrity in the Criminal Justice System, <https://www.unodc.org/unodc/en/about-unodc/index.html?ref=menutop>.

<sup>2</sup> "Information Sheet on Opioid Overdose," World Health Organization, August 21, 2018, [https://www.who.int/substance\\_abuse/information-sheet/en/](https://www.who.int/substance_abuse/information-sheet/en/).

### **History of the Problem:**

Opium has existed since the very first river valley civilizations, around 3000-4000 BC. It was used by the ancient Greeks roughly 2000 years later and was revered for its seemingly magical healing powers. It was also used as an early anesthesia during surgery. Around the 5000-6000 AD, it was traded among East Asia, South Asia and the Middle East via the Silk Road.

During this time of the Silk Road, European consumers obtained a taste for Chinese luxury goods such as silk, spices, porcelain and tea. For this reason, in the 1700s, when the British conquered an opium producing region of India, the East-India Company began to smuggle opium into China. The money gained from this venture, which proved to be rather effective due to the addictive nature of opium, was then used to purchase the luxury goods aforementioned. In an attempt to decrease the opium crisis of their own people, the Chinese attempted to close off trade routes for this illicit substance. However, the British and French used military force to keep the routes open and actually gained land and trade concessions from the Chinese.

In the 1800s in the United States, Americans flooded California to reap the profits of the Gold Rush. During this same era, the United States experienced an influx of Chinese immigrants who brought with them opium, which was consumed in what would later be derogatorily termed 'opium dens.' Ironically, despite earlier opium infiltration of China by Western nations, Chinese immigrants were characterized to be bringing social ills with them and thus immigration was merely halted in the following years. Stereotypes of the "Yellow Peril" continue in American pop culture to this day. Also, in the late 1800s, opium was utilized to treat battle wound pain in the American Civil War at which time many soldiers became addicted.<sup>3</sup>

### **Current Situation:**

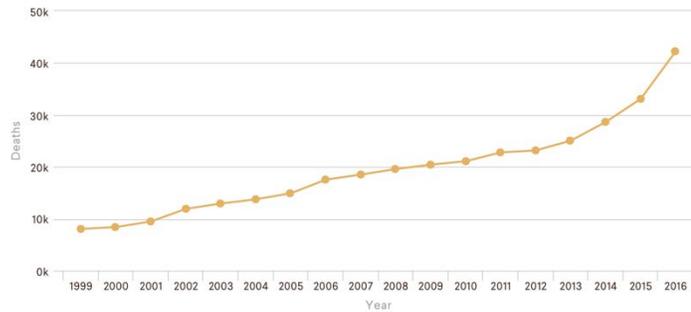
There are a few aspects of the opiate crisis today that are important to note. First, most opiate abuse occurs in wealthy countries in the Global north, like the United States, Canada and most of Europe. Scholars pose a few hypotheses of why this may be. First, most opiate addiction originates from legally obtained prescription drugs. Physicians in the global capitalist north have an incentive to please their patients in order to maintain business, so some prescribe pain relievers, even if the patient does not require them or requires a lower dosage. Moreover, once a patient receives pain relievers, there is no legal mechanism to ensure that this patient takes the correct dosage. Furthermore, even if a responsible physician only prescribes opioids for the correct duration and in the correct dosage, many patients have developed an addiction at that point and turn to illegal opioids, such as heroin. Those in the poor global south often do not have access to opiates due to low capacity health sectors, thus they suffer less from the global opioid crisis. Furthermore, usually opioids are prescribed for conditions like cancer which are more prevalent in the global north than in the global south.<sup>4</sup>

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<sup>3</sup> "Heroin, Morphine and Opiates," History.com, <https://www.history.com/topics/crime/history-of-heroin-morphine-and-opiates>.

<sup>4</sup> National Institute on Drug Abuse. "Opioid Overdose Crisis." NIDA. March 06, 2018. <https://www.drugabuse.gov/drugs-abuse/opioids/opioid-overdose-crisis>.

## U.S. Opioid Overdose Deaths

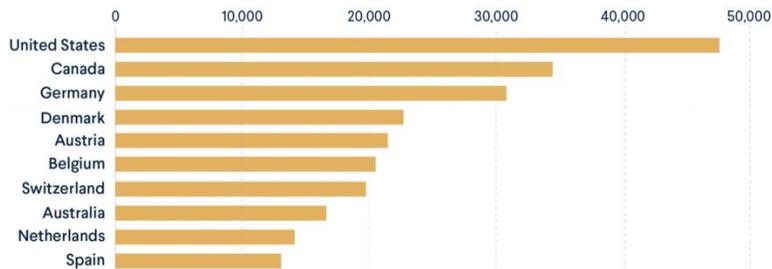


CFR Editorial, National Institute on Drug Abuse; Centers for Disease Control and Prevention.

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## Countries Consuming the Most Opioids

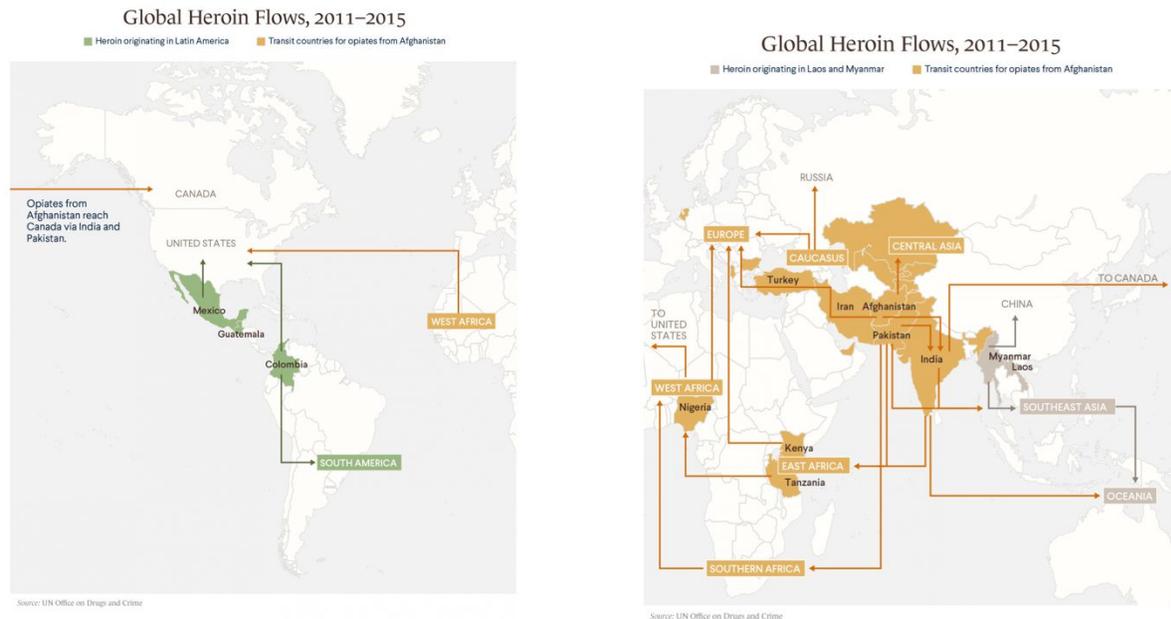
Standard Daily Opioid Doses Per Million People, 2013–2015



Source: UN International Narcotics Control Board

Despite the fact that most opioid addicts existing in the global north, there is increased rhetoric blaming those in the global south for fueling the opioid epidemic. Although it is true that most opioids are smuggled from countries in the global south, there are a host of external forces underlying this trend that are overlooked. First, in some countries like India, Turkey and Australia, opioids are actually legal for medicinal purposes. Those producing the drugs are not actually participating in illegal activity, but rather those transporting those drugs. Furthermore, in other countries, such as Colombia and Afghanistan, farmers of opioids are either coerced by terrorist organizations or are pressured by economic forces. Terrorists contribute to opioid production by either threatening farmers with violence or offering services like security and a better price for their products. For farmers in the global south who maintain a livelihood for themselves and their families through agriculture, opioid farming offers a large competitive

advantage over much lower priced goods sold on the global market. Prices are higher in the black market due to threats of violence, increased demand for addictive goods and the increased risk (and thus costly logistical operations) of smuggling illegal goods. Furthermore, agricultural products face artificially low prices on the global market anyways due to the unequal power dynamic between the consuming nations in the global north (who set trade regulations) and the producing nations in the global south.<sup>5</sup>



Despite this historically clear dynamic between the global south and global north, middle income countries are complicating this narrative. For example, in recent years, China has been illegally manufacturing fentanyl and selling it to wealthy consumers in the global north, thus threatening its manufacturing trade relations with countries in the global north. However, recently, China has begun to challenge American dominance, possibly lessening concern over its relationship with the global north. This rise has included economic growth, military expansion as seen through the crisis in the South China Sea and setting up of the 'string of pearls,' and growth of soft power in the region through construction of parallel institutions to the World Bank and IMF. Ironically, China is developing a sense of regional pride at the same time many countries in the global north are exhibiting more nationalistic tendencies and undermining the validity of many international organizations.<sup>6</sup> Although those in the global south experience less of a threat from the opioid crisis, they are not completely immune to it. For example, many in Egypt utilize opioids to diminish pains associated with hard labor. With the dominance of manual labor-based jobs, such as agriculture

<sup>5</sup> Vanda Felbab-Brown, "Afghanistan's Opium Production Is through the Roof-why Washington Shouldn't Overreact," Brookings.edu, November 21, 2017, <https://www.brookings.edu/blog/order-from-chaos/2017/11/21/afghanistans-opium-production-is-through-the-roof-why-washington-shouldnt-overreact/>.

<sup>6</sup> Reality Check Team, "Fentanyl Crisis: Is China a Major Source of Illegal Drugs?" BBC News, September 24, 2018, <https://www.bbc.com/news/world-45564744>.

and tradecraft, those in the global south are more likely to experience occupation related pain.<sup>7</sup> For those addicted to opium in the global south, access to treatment is minimal. The medicine, Nalaxone, is extremely effective in treating opium addiction. However, those countries with low health care capacity do not have access to this counterbalancing drug. That being said, an interesting study challenged this trend by looking at the pain tolerance of those in a variety of different countries. Those in the global north reported experiencing more and more severe pain. Scholars argue this may be due to cultural values associated with pain. In some countries in the global south, pain is associated with hard work, masculinity and success. Furthermore, in some global south countries, pain is treated with other medicines, such as herbal remedies.<sup>8</sup>

A recent development in relation to opioids is the increased prevalence of fentanyl in the global north. Fentanyl, originally prescribed to counter intense pain, such as that associated with cancer, is particularly threatening because it is a synthetic version of opium, thus the chemical signal that leads to the release of dopamine and the “high” feeling can be artificially heightened. This is not healthy for the body and results in a more addictive drug. High income countries are particularly at risk for synthetic opium due to having the scientific capacity to design such substances.

The international community has taken multiple actions thus far against this opium addiction crisis. First, the UNODC has implemented measures such as placing controls on the two primary ingredients for fentanyl production and increased use of satellite and aerial imagery to identify opium fields in Mexico.<sup>9</sup> Certain countries in the global north are also taking domestic steps towards curbing opium abuse. For example, Donald Trump declared opium abuse a “public health emergency” on October 26, 2017, thus designating more personnel, federal funds and publicity to countering the opium trade and abuse.<sup>10</sup> However, critics argue that those working on countering opium addiction need to focus less on its production and trade and instead focus on its consumption. Essentially, they argue that a more effective approach than utilizing law enforcement measures would be to focus on medical sector practices. Instead of viewing opium production and violence fueling an addiction, they argue the international community should view opium addiction as fueling its production and associated violence. That being said, that argument does open up concern regarding the livelihoods of those opium farmers in the global south who have found a niche market in opium production. Although countries in the global

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<sup>7</sup> Walt Curnow, "It Would Be Very Easy to Quit, but Life Would Be Very Hard': The Addiction Plaguing Egypt's Poor," ABC News, May 04, 2018, <https://www.abc.net.au/news/2018-05-05/opioid-crisis-tramadol-epidemic-sweeping-cairo/9719454>.

<sup>8</sup> Marcia G. Ory, "What the US Can Learn from Other Countries in Dealing with Pain and the Opioid Crisis," The Conversation, September 19, 2018, <http://theconversation.com/what-the-us-can-learn-from-other-countries-in-dealing-with-pain-and-the-opioid-crisis-97491>.

<sup>9</sup> "3 Ways the U.S. and the UN Are Working Together to Fight the Global Opioid Crisis," United Nations Foundation, August 29, 2018, <https://unfoundation.org/blog/post/3-ways-the-us-and-the-un-are-working-together-to-fight-the-global-opioid-crisis/>.

<sup>10</sup> Inflexxion, "The Opioid Crisis: A Global Problem," PainEDU, January 03, 2018, <https://www.painedu.org/opioid-crisis-global-problem/>.

north are projected to see economic gains with decreased costs of medication, treatment and lost productivity, it is less clear if countries in the global south would face economic gains or losses. In one way, they may experience economic gains from decreased costs of violence. However, they may lose substantial chunks of agricultural and transportation sectors.

### **Discussion Questions:**

Should opioid use be allowed for medicinal purposes?

Should we take a more law enforcement approach to opium production and transportation or a more health-sector reform and public awareness approach to opium consumption?

What economic and security provisions, if any, should the international community enact for opium farmers with its banning?

### **Blocs:**

The blocs on this issue are mainly drawn along the lines of opium producers and consumers. The first bloc consists of countries in the global south who are producing opium either legally (India, Turkey and Australia) or illegally (Afghanistan, Colombia, Mexico, Burma). The second bloc consists of countries in the global north who are distributing or consuming opium either illegally or in an inappropriate manner (United States, Canada, most of Europe).

### **Other Helpful Links:**

<https://www.cnn.com/2017/09/18/health/opioid-crisis-fast-facts/index.html>

<https://www.hhs.gov/opioids/about-the-epidemic/index.html>

<https://qz.com/1198965/the-surprising-geography-of-opioid-use-around-the-world/>

<https://www.nytimes.com/2018/04/21/opinion/an-opioid-crisis-foretold.html>

<https://www.bbc.com/news/health-42871641>

[https://www.pharmaceutical-journal.com/opinion/comment/the-prescription-opioid-addiction-and-abuse-epidemic-how-it-happened-and-what-we-can-do-about-it/20068579.article?fi](https://www.pharmaceutical-journal.com/opinion/comment/the-prescription-opioid-addiction-and-abuse-epidemic-how-it-happened-and-what-we-can-do-about-it/20068579.article?firstPass=false)

[rstPass=false](https://www.pharmaceutical-journal.com/opinion/comment/the-prescription-opioid-addiction-and-abuse-epidemic-how-it-happened-and-what-we-can-do-about-it/20068579.article?firstPass=false)

<https://www.minnpost.com/foreign-concept/2018/05/opioid-epidemic-global-problem-and-its-getting-worse/>

<https://www.therecoveryvillage.com/recovery-blog/opioid-crisis-american-issue/#gref>

<https://www.cfr.org/backgrounders/us-opioid-epidemic>

<https://www.cfr.org/backgrounders/us-opioid-epidemic>