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Commission on Narcotic Drugs Background Guide 2024

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Dear Delegates,

Welcome to the 2024 National Model United Nations New York Conference (NMUN•NY)! We are pleased to introduce to you our committee, the Commission on Narcotic Drugs (CND). Your committee's work is facilitated by volunteer staffers. This year's committee staff are: Director Alexandra Bogdasarow and Assistant Director Rakkshet Singhaal (Session 1), and Director Karla Paola Chávez and Assistant Director Tomas Paramo (Session 2). Alexandra Bogdasarow holds a B.A. in Political Science and Chinese Studies. Currently, she's studying Organisation of Social Issues (M.A.) at the University of Trier, Germany, and works as a Research Assistant. Rakkshet Singhaal is pursuing a Master's in International and Development Economics at Yale University. Karla Paola Chávez, holds a Bachelor's in Foreign Affairs and Political Science and is currently pursuing a Master's focused on Sustainable Development. Tomas Paramo is a senior majoring in Global and Regional Studies at the University of Washington in Seattle. The preparation of these materials was supported by Under-Secretaries-General Eric Lowe (Session 1) and Johanna Barton (Session 2).

The topics on the agenda for this committee are:

1. Ensuring Access to Controlled Medicines in Emergencies
2. Measures to Protect Children and Young People from Drug Abuse

This Background Guide serves as an introduction to the topics for this committee. However, it is not intended to replace individual research. We encourage you to explore your Member State's policies in depth and use the bibliography to further your knowledge on these topics. In preparation for the conference, each delegation should submit a Position Paper by 11:59 p.m. ET on 1 March 2023 in accordance with the guidelines in the [Position Paper Guide](#) and the [NMUN•NY Position Papers website](#).

Two resources, available to download from the NMUN website, serve as essential instruments in preparing for the Conference and as a reference during committee sessions:

- The [NMUN Delegate Preparation Guide](#), which explains each step in the delegate process, from pre-conference research to the committee debate and resolution drafting processes. Please take note of the information on plagiarism, and the prohibition on pre-written working papers and resolutions.
- The [NMUN Rules of Procedure](#), which includes the long and short form of the rules, as well as an explanatory narrative and example script of the flow of procedure.

In addition, please review the mandatory [NMUN Conduct Expectations](#) on the NMUN website. They include the conference dress code and other expectations of all attendees. We want to emphasize that any instances of sexual harassment or discrimination based on race, gender, sexual orientation, national origin, religion, age, or disability will not be tolerated. If you have any questions concerning your preparation for this committee, please contact the Deputy Secretaries-General at dsg.ny@nmun.org.

We wish you all the best in your preparations and look forward to seeing you at the Conference!

Alexandra Bogdasarow, Director
Rakkshet Singhaal, Assistant Director
Session 1

Karla Paola Chávez, Director
Tomas Paramo, Assistant Director
Session 2



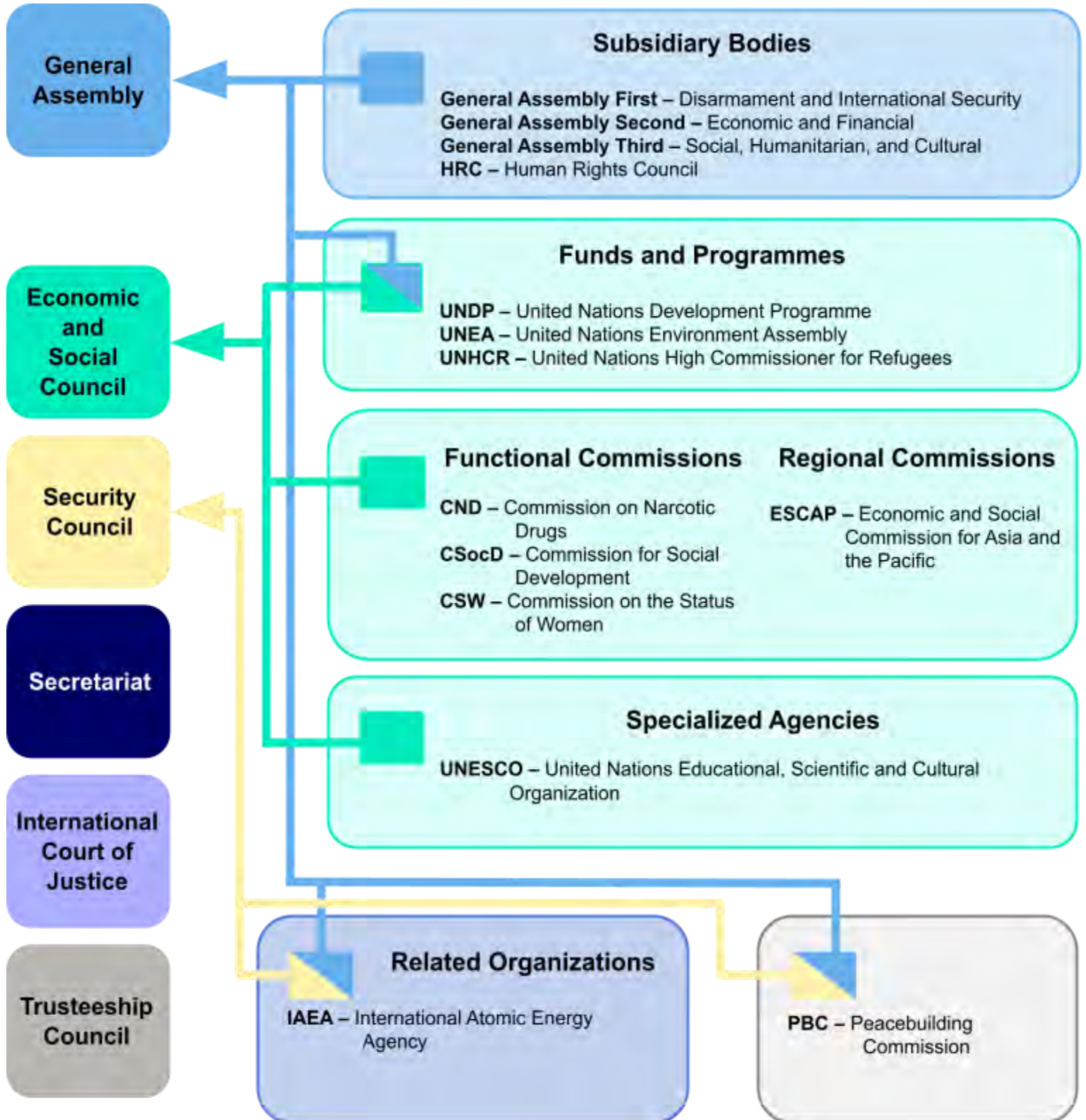
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United Nations System at NMUN·NY

This diagram illustrates the United Nations system simulated at NMUN·NY. It shows where each committee “sits” within the system to demonstrate the reportage and relationships between entities. Examine the diagram alongside the Committee Overview to gain a clear picture of the committee’s position, purpose, and powers within the United Nations system.





Committee Overview

Introduction

Established in 1946 by Economic and Social Council (ECOSOC) resolution 9(1), the Commission on Narcotic Drugs (CND) is the central drug policy-making body of the United Nations.¹ CND advises on drug policy and the control of narcotic drugs through monitoring the application of international drug control treaties.² In addition to being a functional commission of ECOSOC, CND is one of the governing bodies of the United Nations Office on Drugs and Crime (UNODC).³ Its work is guided by the 1961 *Single Convention on Narcotic Drugs* (Single Convention), the 1971 *Convention on Psychotropic Substances*, and the 1988 *Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances*.⁴

The *2030 Agenda for Sustainable Development* (2030 Agenda) (2015) and the Sustainable Development Goals (SDGs) are complementary to CND's work to address the world drug problem effectively.⁵ In particular, SDG 3 (good health and wellbeing), SDG 5 (gender equality), and SDG 16 (peace, justice, and strong institutions) in part seek to minimize the suffering that results from the world drug problem and the use or trafficking of illicit narcotics.⁶

Mandate, Functions, and Powers

CND is a functional commission of and reports directly to ECOSOC.⁷ The commission's original mandate was to assist in monitoring the application of international drug control treaties.⁸ CND's mandate has since evolved significantly, and the commission currently uses research from the World Health Organization (WHO) and the International Narcotics Control Board (INCB) to decide whether narcotic drugs, psychotropic substances, and their precursors, should be placed under or released from international control and if the level of control on these substances needs to be changed.⁹ CND then establishes strategies to control these illicit narcotics and provides recommendations to Member States and UNODC on countering the world drug problem.¹⁰ CND is also mandated to approve the budget for the Fund of the United Nations International Drug Control Programme, which receives the majority of the United Nations' drug control resources.¹¹ CND's role was further clarified and formalized by ECOSOC resolution 1999/30 on "*Review of the United Nations International Drug Control Programme: strengthening the United Nations machinery for international drug control within the scope of the existing international drug control treaties and in accordance with the basic principles of the Charter of the United Nations*," which structured CND's agenda into two distinct sections: a normative section and an operational section.¹² Under the normative segment, CND focuses on policy issues and the upholding of treaties, while under the operational segment, CND exercises its role as the governing body of UNODC.¹³

¹ United Nations, Economic and Social Council. *Resolution on the Establishment of a Commission on Narcotic Drugs (E/RES/9(1))*. 1946.

² United Nations Office on Drugs and Crime. *United Nations Commission on Narcotic Drugs*. N.d.

³ New Zealand Ministry of Foreign Affairs and Trade. *United Nations Handbook 20223-234*. 2023. p. 146.

⁴ United Nations Office on Drugs and Crime. *United Nations Commission on Narcotic Drugs*. N.d.

⁵ United Nations Office on Drugs and Crime. *2030 Agenda for Sustainable Development*. N.d.

⁶ United Nations Office on Drugs and Crime. *2030 Agenda for Sustainable Development*. N.d.

⁷ United Nations Office on Drugs and Crime. *Mandate and Functions*. N.d.

⁸ United Nations Office on Drugs and Crime. *Mandate and Functions*. N.d.

⁹ New Zealand Ministry of Foreign Affairs and Trade. *United Nations Handbook 20223-234*. 2023. p. 146.

¹⁰ New Zealand Ministry of Foreign Affairs and Trade. *United Nations Handbook 20223-234*. 2023. p. 146.

¹¹ New Zealand Ministry of Foreign Affairs and Trade. *United Nations Handbook 20223-234*. 2023. p. 146.

¹² United Nations, Economic and Social Council. *Review of the United Nations International Drug Control Programme: strengthening the United Nations machinery for international drug control within the scope of the existing international drug control treaties and in accordance with the basic principles of the Charter of the United Nations (E/RES/1999/30)*. 1999.

¹³ United Nations, Economic and Social Council. *Review of the United Nations International Drug Control Programme: strengthening the United Nations machinery for international drug control within the scope of the existing international drug control treaties and in accordance with the basic principles of the Charter of the United Nations (E/RES/1999/30)*. 1999.



One of the most notable expansions of CND's mandate came with the adoption of the *Political Declaration and Plan of Action on International Cooperation towards an Integrated and Balanced Strategy to Counter the World Drug Problem* (the Plan) at CND's 52nd session in 2009.¹⁴ CND is responsible for encouraging and assisting Member States in implementing the Plan and for developing new "indicators and instruments" to measure the extent of the global drug problem.¹⁵

While the following list is not exhaustive, CND's mandate can be summarized as:

- **CND will generally:** supervise the application of narcotic treaties; advise ECOSOC on all issues related to the control of narcotic drugs, psychotropic substances, and their precursors; monitor national, regional, and international commitments to implement joint commitments aimed at countering the world drug problem; make recommendations to Member States and other bodies.¹⁶
- **CND will not generally:** make binding decisions on drug policy; unilaterally direct Member States, NGOs, and other United Nations bodies to implement actions; enforce action against Member States not complying with international drug control treaties.¹⁷

Governance, Funding, and Structure

CND has 53 members, with 11 seats each for African and Asian States, 10 for Latin American and Caribbean States, six for Eastern European States, 14 for Western European and Other States, and a rotating seat between the Asian and Latin American or Caribbean States every four years.¹⁸ Members must be party to the 1961 Single Convention, and there must be "adequate representation" for Member States that are important producers of opium or coca leaves, Member States where illicit narcotics are manufactured, and Member States where the use of illicit narcotics is particularly concerning.¹⁹ Members of CND are elected by an organizational session of ECOSOC.²⁰

CND is led internally by a Bureau and Extended Bureau.²¹ The Bureau is composed of a Chairperson, three Vice-Persons, and a Rapporteur, who are elected at the end of each CND session for the following session.²² The Bureau works with the United Nations Secretariat to prepare CND sessions and undertake organizational work between sessions.²³ The Extended Bureau consists of representatives from the five regional groups, the European Union, and the Group of 77 and China.²⁴ CND has five subsidiary bodies to advance cooperation in drug law enforcement activities at the regional level.²⁵ ECOSOC established four Heads of National Drug Law Enforcement Agencies (HONLEA) in Europe, Latin America and the

¹⁴ United Nations Office on Drugs and Crime. *Political Declaration and Plan of Action on International Cooperation Towards an Integrated and Balanced Strategy to Counter the World Drug Problem*. 2009. p. iii.

¹⁵ United Nations Office on Drugs and Crime. *Political Declaration and Plan of Action on International Cooperation Towards an Integrated and Balanced Strategy to Counter the World Drug Problem*. 2009. p. 8.

¹⁶ United Nations Office on Drugs and Crime. *Mandate and Functions*. N.d; New Zealand Ministry of Foreign Affairs and Trade. *United Nations Handbook 20223-234*. 2023. p. 146.

¹⁷ United Nations Office on Drugs and Crime. *Mandate and Functions*. N.d; New Zealand Ministry of Foreign Affairs and Trade. *United Nations Handbook 20223-234*. 2023. p. 146.

¹⁸ United Nations Office on Drugs and Crime. *Membership and Bureau*. 2023.

¹⁹ United Nations Office on Drugs and Crime. *Membership and Bureau*. 2023.

²⁰ United Nations, Commission on Narcotic Drugs et al. *Fact sheet on elections and membership*. N.d.

²¹ United Nations Office on Drugs and Crime. *Membership and Bureau*. 2023.

²² United Nations Office on Drugs and Crime. *Membership and Bureau*. 2023.

²³ United Nations Office on Drugs and Crime. *Membership and Bureau*. 2023.

²⁴ United Nations Office on Drugs and Crime. *Membership and Bureau*. 2023.

²⁵ United Nations Office on Drugs and Crime. *CND Subsidiary Bodies - Heads of National Drug Law Enforcement Agencies and Subcommission*. N.d.



Caribbean, Asia and the Pacific, and Africa.²⁶ In addition, the Subcommittee on Illicit Drug Traffic and Related Matters in the Near and Middle East provides CND with a regional perspective on illicit drug activity in the Near and Middle East.²⁷

CND meets twice annually, with a regular session in which CND adopts decisions and resolutions, and a reconvened session to discuss budgetary and administrative issues as part of CND's role as the governing body of UNODC.²⁸ CND also regularly convenes intersessional meetings to provide policy guidance to UNODC.²⁹

²⁶ United Nations Office on Drugs and Crime. *CND Subsidiary Bodies - Heads of National Drug Law Enforcement Agencies and Subcommittee*. N.d.

²⁷ United Nations Office on Drugs and Crime. *CND Subsidiary Bodies - Heads of National Drug Law Enforcement Agencies and Subcommittee*. N.d.

²⁸ United Nations Office on Drugs and Crime. *Events*. 2023.

²⁹ United Nations Office on Drugs and Crime. *Events*. 2023.



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https://www.unodc.org/documents/commissions/CND_CCPCJ_joint/Membership/Elections_and_Membership_Factsheet-status_January_2020.pdf

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https://www.unodc.org/unodc/en/Resolutions/resolution_1999-07-28_1.html

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https://www.unodc.org/unodc/en/commissions/CND/Subsidiary_Bodies/Subsidiary-Bodies_Index.html

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United Nations Office on Drugs and Crime. *Political Declaration and Plan of Action on International Cooperation Towards an Integrated and Balanced Strategy to Counter the World Drug Problem*. 2009. Retrieved 21 October 2023 from: <https://www.unodc.org/documents/ungass2016/V0984963-English.pdf>

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<https://www.unodc.org/unodc/en/commissions/CND/Events.html>

United Nations Office on Drugs and Crime. *Membership and Bureau*. 2023. Retrieved 21 October 2023 from: <https://www.unodc.org/unodc/en/commissions/CND/Membership/Membership.html>

United Nations Office on Drugs and Crime. *United Nations Commission on Narcotic Drugs*. 2023. Retrieved 21 October 2023 from:

https://www.unodc.org/res/commissions/CND/Mandate_Functions/scheduling-elearning-tutorial_html/Brochure_on_the_Commission_on_Narcotic_Drugs.pdf



1. Ensuring Access to Controlled Medicines in Emergencies

"[...] It is essential that governments are prepared to protect the health of populations and respond immediately to emergencies. This includes having ready supplies of lifesaving medicines [...]"³⁰

Introduction

A controlled medicine is a drug or other substance used for medical or research purposes while strictly regulated due to the possibility of abuse or addiction.³¹ The *Single Convention on Narcotic Drugs* (Single Convention) (1961) categorizes and provides guidelines for the international community to properly regulate these narcotics.³² The World Health Organization (WHO) lists these substances as essential medicines in emergency situations.³³ It frequently includes them in emergency health kits to manage pain, palliative care, surgical care, anesthesia, the treatment of mental health, and some neurological conditions, all of which depend on several internationally controlled medicines.³⁴

The International Narcotics Control Board (INCB) estimates an insufficient amount of controlled medications are used for legitimate purposes due to Member States' unclear understanding of the demand in emergencies.³⁵ In the past 20 years, over 7,348 emergencies have been reported, including 40% climate-related emergencies resulting from climate change and natural disasters.³⁶ Emergencies are severe humanitarian crises in which Member States lack the capacity to respond effectively.³⁷ Other emergencies include public health emergencies, such as pandemics and external or domestic armed conflicts.³⁸ These emergencies, including the COVID-19 pandemic, have made it difficult to guarantee the availability of controlled medications in times of crisis.³⁹ The impacts of the pandemic have shown the importance of universal access to health care, including access to controlled medications.⁴⁰ The difficulties identified by the international community for low and middle-income states during the COVID-19 pandemic include limited purchasing power for medical resources and the lack of an accommodating and efficient trade system for emergencies.⁴¹

In its outlook for 2023, the United Nations estimated that 339 million people will require humanitarian aid, an increase from 274 million people in 2022.⁴² Humanitarian aid refers to immediate life-saving needs, such as shelter, food, water, medical care, and medicine supplies.⁴³ According to WHO, it is important to define the aid that should receive top priority during emergencies to ensure the continuity of service

³⁰ World Health Organization. *WHO updates critical medicines list for radiological and nuclear emergencies*. 2023.

³¹ National Cancer Institute. *Controlled Substance*. 2023.

³² United Nations, Conference for the Adoption of a Single Convention on Narcotic Drugs. *Single Convention on Narcotic Drugs, 1961 (as amended by the 1972 Protocol amending the Single Convention on Narcotic Drugs, 1961)*. 1961.

³³ World Health Organization. *Emergency Health Kits*. 2020.

³⁴ Ibid.

³⁵ International Narcotic Control Board. *Guide on Estimating Requirements for Substances under International Control*. 2017. p. 1.

³⁶ World Health Organization. *INCB, UNODC and WHO Joint Statement on Access to Controlled Medicines in Emergencies*. 2021.

³⁷ Office of the United Nations High Commissioner for Refugees. *Policy on Emergency Preparedness and Response*. 2023.

³⁸ United Nations Children's Fund. *Core Commitments for Children: Scope of CCC's*. 2023.

³⁹ World Health Organization. *INCB, UNODC and WHO Joint Statement on Access to Controlled Medicines in Emergencies*. 2021.

⁴⁰ International Narcotic Control Board. *Coronavirus (COVID-19) Pandemic*. 2020.

⁴¹ World Health Organization. *INCB, UNODC and WHO Joint Statement on Access to Controlled Medicines in Emergencies*. 2021.

⁴² United Nations Office for the Coordination of Humanitarian Affairs. *Outlook for 2023: 339 million people need humanitarian assistance*. 2022.

⁴³ Human Rights Careers. *10 Examples of Humanitarian Aid*. 2022.



delivery of controlled substances.⁴⁴ For instance, critical preventative measures for infectious diseases, including immunization, are among the high-priority categories.⁴⁵

A specific geographic area of concern is the Eastern Mediterranean region, which is affected due to ongoing political conflicts in many countries.⁴⁶ In this region, 62 million people need health care, including access to controlled medications.⁴⁷ Access to controlled medicines in the region is impacted by deteriorated health systems' infrastructure, most particularly in Iraq, Syria, and Yemen.⁴⁸ When there is a humanitarian disaster or other emergency, it can be challenging to provide quality healthcare due to financial, material, human resource, or security constraints.⁴⁹ Natural disasters, armed conflicts, and other humanitarian emergencies increase shortages of medical supplies and demand for medical assistance.⁵⁰ Humanitarian aid is often interrupted due to regulatory requirements associated with importing and exporting essential medicines, resulting in a failure to meet the need for access to controlled medicines in some emergencies.⁵¹

International and Regional Framework

The Single Convention was adopted by the United Nations Conference for the Adoption of a Single Convention on Narcotic Drugs in 1961, and aims to control drug abuse, trafficking, and ensure access to substances for medical and scientific purposes.⁵² Substances are classified under four categories or "schedules," implementing control and regulations based on a substance's potential for abuse, dependence, and medical use.⁵³ Article 44 of the Single Convention consolidates all previous treaties and lays the foundation for future international frameworks as a single unified basis.⁵⁴ Earlier treaties and agreements include the 1912 Hague *International Opium Convention*, which was one of the first international efforts to address the global issue of opium and its derivatives; the *Agreement Concerning the Manufacture of, Internal Trade in and Use of Prepared Opium* (1925), which served as an extension of the 1912 Convention to close major loopholes; and, the *International Opium Convention* (1925), which expanded the scope of the 1912 treaty to include a wider range of opiates and synthetic opioids.⁵⁵ The *Convention on Psychotropic Substances*, adopted by the United Nations Economic and Social Council (ECOSOC) in 1971, builds upon the Single Convention to broaden control and regulation over synthetic and semi-synthetic drugs, such as amphetamines, barbiturates, and hallucinogens.⁵⁶ The *Convention on Psychotropic Substances* highlights the importance of psychotropic substances for medical purposes and allows legitimate access to them for medical and emergency treatment and research.⁵⁷

The *Agreement on Trade-Related Aspects of Intellectual Property Rights* (TRIPS Agreement), signed by the World Trade Organization (WTO) in 1994, sets the framework for intellectual property rights of

⁴⁴ World Health Organization. *COVID-19: Operational guidance for maintaining essential health services during an outbreak*. 2020. p. 4.

⁴⁵ Ibid.

⁴⁶ World Health Organization. *Countries in Crisis*. 2023.

⁴⁷ Ibid.

⁴⁸ Ibid.

⁴⁹ United Nations Office for the Coordination of Humanitarian Affairs. *Improving medical care during humanitarian crises*. 2023.

⁵⁰ World Health Organization. *Model Guidelines for the International Provision of Controlled Medicines for Emergency Medical Care*. 1996.

⁵¹ Ibid.

⁵² United Nations, Conference for the Adoption of a Single Convention on Narcotic Drugs. *Single Convention on Narcotic Drugs, 1961 (as amended by the 1972 Protocol amending the Single Convention on Narcotic Drugs, 1961)*. 1961.

⁵³ Ibid.

⁵⁴ Ibid.

⁵⁵ Ibid. p. 21.

⁵⁶ United Nations Conference for the Adoption of a Protocol on Psychotropic Substances. *Convention on Psychotropic Substances*. 1971.

⁵⁷ Ibid. p. 5.



essential medicines to protect the interests of Member States and populations in need of the medicines.⁵⁸ The *Doha Declaration on the TRIPS Agreement* (2001) was a declaration issued by WTO Member States to address global access to controlled medicines, by emphasizing flexibility from the TRIPS Agreement not to hinder Member States' right to protect their independent public health system.⁵⁹ The 1996 *Model Guidelines for the International Provision of Controlled Medicines for Emergency Medical Care* (Model Guidelines), adopted by ECOSOC, aim to improve the international supply of essential controlled medicines' efficiency in emergencies.⁶⁰ To manage emergency medical treatments more effectively, these guidelines provide a list of essential controlled medicines to prioritize by Member States in emergency situations.⁶¹ Furthermore, the Model Guidelines encourage simplified import and export procedures in emergency situations to reduce waiting times to access controlled medicines.⁶² The *Strategic Framework for Emergency Preparedness* (2017), developed by WHO, guides and strengthens global health emergency preparedness efforts by emphasizing the importance of building robust healthcare infrastructure, strengthening surveillance and early warning systems, improving response coordination, and enhancing risk communication.⁶³ The Framework notes that ensuring an uninterrupted supply chain, facilitating regulatory flexibility, collaboration between Member States' authorities, and education and training are critical in ensuring access to controlled medicines.⁶⁴

Ensuring access to controlled medicines in emergencies is also outlined in the Sustainable Development Goals (SDGs) of the *2030 Agenda for Sustainable Development* (2015), specifically in SDG 1 (no poverty), SDG 3 (good health and well-being), and SDG 17 (partnerships for the goals).⁶⁵ SDG 1 relates to emergency access to controlled medicines through targets 1.5 and 1.A.⁶⁶ Target 1.5 emphasizes the development of Member States' resilience and the reduction of their vulnerability to emergencies.⁶⁷ Target 1.A promotes an enhanced system of resource mobilization through improved international cooperation.⁶⁸ SDG 3 emphasizes the importance of access to controlled medicines in targets 3.8, and 3.B.⁶⁹ Target 3.8 aims to achieve universal health coverage and access to effective and high-quality medicines, vaccines, and healthcare services by 2030.⁷⁰ Target 3.B focuses on providing essential medicines effectively to least developed countries (LDCs) with the *Doha Declaration on the TRIPS Agreement and Public Health* and TRIPS.⁷¹ SDG 17 relates to access to controlled medicines through targets 17.9 and 17.10.⁷² Target 17.9 seeks international support for capacity-building in LDCs through multilateral cooperation (North-South, South-South, and triangular), enabling easier access to controlled medicines in LDCs.⁷³ Target 17.10 focuses on establishing an equitable international trading system under WTO, which is necessary for Member States to trade and access controlled medicines in emergency situations.⁷⁴

⁵⁸ World Trade Organization. *Agreement on Trade Related Aspects of Intellectual Property Rights*. 1994.

⁵⁹ World Trade Organization. *Declaration on the TRIPS Agreement and Public Health*. 2001.

⁶⁰ World Health Organization. *Model Guidelines for the International Provision of Controlled Medicines for Emergency Medical Care*. 1996.

⁶¹ Ibid.

⁶² Ibid.

⁶³ World Health Organization. *A Strategic Framework for Emergency Preparedness*. 2017.

⁶⁴ Ibid.

⁶⁵ United Nations, General Assembly. *Transforming our world: the 2030 Agenda for Sustainable Development (A/RES/70/1)*. 2015.

⁶⁶ Ibid.

⁶⁷ Ibid.

⁶⁸ Ibid.

⁶⁹ Ibid.

⁷⁰ Ibid.

⁷¹ United Nations, Sustainable Development Goals. *Goal 3: Ensure healthy lives and promote well-being for all at all ages*. 2020.

⁷² Ibid.

⁷³ Ibid.

⁷⁴ Ibid.



Role of the International System

A key priority for the Commission on Narcotic Drugs (CND) is to ensure availability and access to controlled medicines for scientific and medical purposes.⁷⁵ The United Nations Office on Drugs and Crime (UNODC), as a specialized agency of CND, created the *Technical Guidance: Increasing Access and Availability of Controlled Medicines* (2018) to identify three core areas for Member States to draft policy and create a more efficient system to access controlled medicines: systems integration, education and awareness, and supply chain management.⁷⁶ System Integration aims to integrate the public health system and the drug regulatory system.⁷⁷ Education and Awareness focuses on improving training and awareness of healthcare workers.⁷⁸ Supply Chain Management aims to improve efficiency and access to controlled medicines.⁷⁹

During CND's 52nd session in 2009, Member States adopted the *Political Declaration and Plan of Action on International Cooperation towards an Integrated and Balanced Strategy to Counter the World Drug Problem*.⁸⁰ The Political Declaration and Plan of Action is divided into three parts: demand reduction and related measures; supply reduction and related measures; and, countering money-laundering and promoting judicial cooperation to enhance international cooperation.⁸¹ It promotes increasing affordability for controlled medicines to increase access to controlled drugs in emergencies.⁸² In its 62nd session in 2019, CND presented the *Implementation of All International Drug Policy Commitments* (2019) as a revision of the goals and standards set in the Political Declaration and Plan of Action.⁸³ CND held its 63rd session in 2020 and adopted resolution 63/3 on "Promoting awareness-raising, education and training as part of a comprehensive approach to ensuring access to and the availability of internationally controlled substances for medical and scientific purposes and improving their rational use."⁸⁴ This resolution aims to increase knowledge, education, and training to ensure that internationally regulated substances for medical and scientific use are easily accessible and available.⁸⁵ In CND's 65th session in 2022, INCB President Jagjit Pavadia called upon Member States to scale up international drug policy commitments and improve access to controlled medicines for medical and scientific purposes.⁸⁶ In his address, President Pavadia illustrated the disparities in access to controlled medicines between Europe, North America, and the rest of the world.⁸⁷

⁷⁵ United Nations, International Narcotics Control Board. *Joint Call for Action by the United Nations and the Commission on Narcotic Drugs: Scaling up the implementation of international drug policy commitments on improving availability of and access to controlled substances for medical and scientific purposes*. 2022.

⁷⁶ United Nations Office on Drugs and Crime. *Technical Guidance: Increasing Access and Availability of Controlled Medicines*. 2018. p. 8.

⁷⁷ *Ibid.* p. 10.

⁷⁸ *Ibid.* p. 14.

⁷⁹ *Ibid.* p. 17.

⁸⁰ *Ibid.* p. 30.

⁸¹ United Nations Office on Drugs and Crime. *Implementation of all International Drug Policy Commitments*. 2019.

⁸² *Ibid.*

⁸³ *Ibid.*

⁸⁴ United Nations, Commission on Narcotic Drugs. *Promoting awareness-raising, education, and training as part of a comprehensive approach to ensuring access to and the availability of internationally controlled substances for medical and scientific purposes and improving their rational use (63/3)*. 2020.

⁸⁵ *Ibid.*

⁸⁶ United Nations, International Narcotics Control Board. *Joint Call for Action by the United Nations and the Commission on Narcotic Drugs: Scaling up the implementation of international drug policy commitments on improving availability of and access to controlled substances for medical and scientific purposes*. 2022.

⁸⁷ *Ibid.*



In 2021, INCB, UNODC, and WHO issued a joint statement calling on governments to facilitate access to controlled medicines during emergencies, especially climate-related disasters and pandemics.⁸⁸ To increase the number of patients accessing these substances, UNODC, in collaboration with WHO and the Union for International Cancer Control, began the Joint Global Programme on Access to Controlled Drugs for Medical Purposes while Preventing Diversion and Abuse (GLOK67).⁸⁹ GLOK67 aims to combat the diversion and non-medical use of controlled substances while increasing access for patients in need.⁹⁰ Moreover, the joint statement encouraged Member States to implement simplified control procedures for exporting, importing, and transporting controlled medicines to address the issue of a halted medicine supply chain affecting COVID-19 and non-COVID-19 patients, in accordance with the Single Convention and the *Convention on Psychotropic Substances*.⁹¹ Simplified regulations remove import authorizations provided that accredited organizations handle import and delivery.⁹² The statement also encouraged the use of INCB's International Import and Export Authorization System (I2ES) and UNODC-INCB Pre-Export Notification (PEN Online) systems to report and facilitate the transaction of controlled medicines in case of emergencies to the international community.⁹³ These systems ensure compliance with international drug regulations, prevent diversion of illicit markets, and facilitate legitimate trade of controlled medicines for medical and scientific purposes.⁹⁴

In 1999, Doctors Without Borders launched the Campaign for Access to Essential Medicines to address an overwhelming disparity in access to medicines in developing states compared to developed states.⁹⁵ This campaign has three main points: overcoming barriers to essential medicine access; stimulating research and medical development; and, promoting trade exceptions for controlled medicines.⁹⁶ These disparities can be seen in regions like Latin America, where Member States have not followed a single route in implementing economic regulation policies for promoting access to medicines.⁹⁷ Across other regions, a similar situation threatens developing states.⁹⁸ In Africa, it is estimated that 50-60% of the population lacks access to essential medicines, largely due to medicine shortages.⁹⁹ In the Middle East, since the Syrian civil war began in 2011, Russian and Syrian government intervention has hindered humanitarian aid and access to needed controlled medicines.¹⁰⁰ Organizations, such as the United Nations Children's Fund and the International Committee of the Red Cross, are actively trying to deliver medical aid and medicines to these underprivileged areas.¹⁰¹ In the South-East Asia region, WHO identified various barriers to access to controlled medicines, including gaps in policy implementation,

To reduce medicine shortages and international supply chain dependence during emergencies like the COVID-19 pandemic, the European Union (EU) is working on improving access to medicines by bringing

⁸⁸ World Health Organization. *INCB, UNODC and WHO Joint Statement on Access to Controlled Medicines in Emergencies*. 2021.

⁸⁹ United Nations Office on Drugs and Crime. *Access to Controlled Drugs for Medical Purposes, While Preventing Diversion and Abuse (GLOK67)*. 2020.

⁹⁰ Ibid.

⁹¹ United Nations Office on Drugs and Crime. *INCB, WHO and UNODC statement on access to internationally controlled medicines during COVID-19 pandemic*. 2020.

⁹² United Nations, International Narcotics Control Board. *Availability of Internationally Controlled Drugs: Ensuring Adequate Access for Medical and Scientific Purposes*. 2016.

⁹³ United Nations Office on Drugs and Crime. *INCB, WHO and UNODC statement on access to internationally controlled medicines during COVID-19 pandemic*. 2020.

⁹⁴ Ibid.

⁹⁵ Medecins Sans Frontières. *Access to Medicines*. 2012.

⁹⁶ Ibid.

⁹⁷ Tobar et al. *Economic tools for ensuring access to medicines in Latin American countries*. 2014.

⁹⁸ Nyanwura et al. *International Journal of Scientific & Technology Research. Essential Medicines Availability and Affordability: A Case Study Of The Top Ten Registered Diseases In Builsa District Of Ghana*. 2013.

⁹⁹ Ibid.

¹⁰⁰ Leyh et al. *National Library of Medicine. Access to Medicines in Times of Conflict: Overlapping Compliance and Accountability Frameworks in Syria*. 2018.

¹⁰¹ Ibid.



the manufacturing of active pharmaceutical ingredients back to Europe, as 80% of active pharmaceutical ingredients and 40% of finished medicines originate in India and China.¹⁰² Legislation in the EU requires the private sector to ensure a continuous supply of medicines and to notify authorities before any supply interruptions to allow EU nations to actively assess and maintain a sustainable supply of medicines.¹⁰³ The 2023 WHO report on *Access to Controlled Medicines for Pain Management in the WHO South-East Asia Region* identifies barriers to access controlled medicines in the South-East Asia region, such as gaps in policy implementation and inaccurate estimations of required opioid analgesics.¹⁰⁴ To improve access to controlled medicines in the region, WHO recommends context-specific regulations to ensure “fit-for-purpose” supply chains, better training and education programmes, and strategic partnerships between governments, the private sector, and other stakeholders.¹⁰⁵

Strengthening International Drug Supply Chains

The world is facing a growing problem with medicine shortages, meaning there are not enough medications to meet the demands of patients.¹⁰⁶ For example, a survey by the Pharmaceutical Group of the European Union (2022) revealed that Member States reported shortages of controlled medications, with 76% of dispensing facilities experiencing challenges accessing respiratory medications.¹⁰⁷ Economic, regulatory, logistical, and social factors contribute to the unavailability of controlled medications during emergencies.¹⁰⁸ These social factors include corruption, strict regulations, ineffective supply chains, insufficient purchasing power, and low production of medicines.¹⁰⁹ Shortages are exacerbated in emergencies, as controlled medications must follow strict regulations when imported or transported to ensure their safety and quality.¹¹⁰ These regulations may delay the delivery of urgent medications for humanitarian relief during emergencies.¹¹¹ For instance, during the COVID-19 pandemic, a shortage of critical drugs worldwide and supply chain disruptions due to increased demand over short periods resulted in shortages of essential goods, such as sedatives and analgesics for intubation protocols.¹¹²

Strengthening supply chains can ensure that people with chronic diseases can access medications they need and reduce acute exacerbations of their condition.¹¹³ The supply chain for controlled substances consists of getting these medications from the manufacturer to the patient, including production, distribution, and dispensing aspects.¹¹⁴ Effective supply chains are essential for improving health outcomes during a crisis, and strengthening the supply chain is critical for effective humanitarian

¹⁰² Scholz. European Parliament. *Addressing Shortages of Medicines*. 2020.

¹⁰³ Ibid.

¹⁰⁴ World Health Organization. *Access to controlled medicines for pain management in the WHO South-East Asia Region*. 2023.

¹⁰⁵ Ibid.

¹⁰⁶ Bishen et al. World Economic Forum. *Here's why some countries are experiencing medicine shortages - and what can be done to ensure supply*. 2023; World Health Organization. *Assessing the magnitude and nature of shortages of essential medicines and vaccines: focus on the WHO European Region*. 2020.

¹⁰⁷ Ibid.

¹⁰⁸ World Health Organization. *WHO Director-General's remarks at the 65th Session of the Commission on Narcotic Drugs— 6 September 2022*. 2022.

¹⁰⁹ Ibid.

¹¹⁰ United Nations, International Narcotics Control Board. *Availability of Internationally Controlled Drugs: Ensuring Adequate Access for Medical and Scientific Purposes*. 2016. pp. 75-76.

¹¹¹ Ibid.

¹¹² Burry et al. ScienceDirect. *It Takes a Village. Contending With Drug Shortages During Disasters*. 2020. pp.2414-2415; World Health Organization. *COVID-19: Operational guidance for maintaining essential health services during an outbreak*. 2020. p. 10.

¹¹³ World Health Organization. *COVID-19: Operational guidance for maintaining essential health services during an outbreak*. 2020. p. 10.

¹¹⁴ United Nations Office on Drugs and Crime. *Technical Guidance: Increasing Access and Availability of Controlled Medicines*. 2018. p. 17.



responses.¹¹⁵ An effective supply chain requires systematic investments in resources and processes to ensure that logistics are ready for unexpected events, such as emergencies.¹¹⁶ For humanitarian relief, this includes implementing framework agreements with suppliers, improving supply chain procedures and manuals between the private sector and stakeholders of humanitarian aid, and providing proper training to all parties involved.¹¹⁷

One way to strengthen supply chains is by implementing procurement and supply management (PSM).¹¹⁸ PSM focuses on a comprehensive approach to ensure that medicines and health products are safe, effective, and demonstrate good quality.¹¹⁹ One example of effective PSM in the international community is the WHO European Programme of Work.¹²⁰ The Programme supports countries in ensuring access to medicines by identifying and fixing problems in the regulation, production, procurement, and supply of drugs.¹²¹ It strengthens information systems, expands collaboration between countries, and develops fair pricing options.¹²² National and regional supply chains could also benefit from endorsing global supply chains (GSCs), which have expanded to an increasing number of LDCs.¹²³ They entail the production of commodities using raw materials from multiple states.¹²⁴ This enables transnational corporations (TNCs) to utilize the most significant physical and human resources in several countries, maintaining their competitiveness by increasing productivity and lowering costs.¹²⁵ GSCs provide LDCs benefits, including lower production costs, increased competition and efficiency, and access to new technologies and skills.¹²⁶ The United Nations Conference on Trade and Development report on *Global Supply Chains: Trade and Economic Policies for Developing Countries* offers several policy recommendations for LDCs to benefit from GSCs, such as investing in infrastructure, fostering competition and innovation, training and education programs, and creating regional and international value chains.¹²⁷

Moreover, frameworks, such as the *Strategic Framework for Emergency Preparedness*, help Member States ensure national emergency preparedness plans are created and implemented.¹²⁸ These plans ensure a reliable supply of medicines are available in an emergency, prioritizing availability by keeping a reasonable supply in stock or quickly producing and distributing them, including transporting medicines or patients on a case-to-case basis.¹²⁹ According to the framework, countries should coordinate with other stakeholders to ensure a reliable supply of medicines in emergencies.¹³⁰

¹¹⁵ Donato et al. *Strong Supply Chains Transform Public Health*. 2016. p.1; Center for Humanitarian Logistics and Regional Development. *The State of Logistics and Supply Chain in the Humanitarian Context: Global Survey Findings*. 2022. pp. 7-11.

¹¹⁶ Center for Humanitarian Logistics and Regional Development. *The State of Logistics and Supply Chain in the Humanitarian Context: Global Survey Findings*. 2022. pp. 7-11.

¹¹⁷ Ibid.

¹¹⁸ World Health Organization. *Supporting the development and strengthening of procurement and supply management systems*. 2023.

¹¹⁹ Ibid.

¹²⁰ Ibid.

¹²¹ Ibid.

¹²² Ibid.

¹²³ Nicita et al. *Global Supply Chains: Trade and Economic Policies for Developing Countries*. 2013. p. 1.

¹²⁴ Ibid.

¹²⁵ Ibid.

¹²⁶ Ibid. pp. 1-3.

¹²⁷ Ibid. pp. 16-19.

¹²⁸ World Health Organization. *A strategic framework for emergency preparedness*. 2017. pp. 3-4.

¹²⁹ Ibid. p. 12.

¹³⁰ Ibid. p. 4.



Financing for Access to Controlled Medicines in Emergencies

While countries of all income levels experience shortages of controlled medicines during emergencies, the shortages often disproportionately impact low- and middle-income countries (LMICs).¹³¹ LMICs have less purchasing power on the global pharmaceutical market, and systems designed to manage controlled medicines may not allow for enough exceptions for emergencies.¹³² Furthermore, humanitarian organizations have limited resources for ever-increasing needs.¹³³ This means that often available funding will be used on capacity-building efforts, such as transporting staff, training personnel, administrative work, and addressing life-saving relief operations, including assessing needs, transporting first aid kits and food, transferring disaster victims to healthcare centers, and providing survival kits.¹³⁴

According to the 2023 Secretary-General report on Strengthening of the coordination of emergency humanitarian aid of the United Nations (A/76/74–E/2021/54), despite different donors and stakeholder contributions reaching \$19 billion in humanitarian funding, the funding gap between the people affected by emergencies and the resources to cover their needs widened to 50% in 2020 because the needs of people affected by humanitarian emergencies grew significantly.¹³⁵ Furthermore, donors and operational organizations often face difficulty deciding which life-saving interventions to prioritize and which to scale back.¹³⁶ This reliance on individual decision-making processes results in an uneven allocation of resources, leading to gaps and overlaps in funding decisions and forgotten crises because there are only finite resources to allocate.¹³⁷ To counteract these challenges, the report recommends the international community focus on engaging stakeholders, such as Member States and non-governmental organizations (NGOs), in disaster risk reduction, humanitarian relief, and development.¹³⁸

During its 65th session, CND highlighted the need for sustainable and adequate funding to facilitate access to controlled medicines, including during emergencies.¹³⁹ However, financing for access to controlled medications in emergencies can be difficult depending on the nature of the emergency.¹⁴⁰ For instance, disease outbreaks like Ebola typically result in a lack of volunteers, medications and vaccines, medical supplies, and ready-to-use financial resources.¹⁴¹ Ready-to-use financial resources are the immediate funds and assets used to finance operations and investments.¹⁴²

Efforts to improve the transparency of humanitarian aid data have provided insight into how money flows through the international aid system.¹⁴³ This data makes it easier for donors and stakeholders to understand adequate resource distribution and track their impact.¹⁴⁴ For instance, the United Nations

¹³¹ World Health Organization. *INCB, UNODC and WHO Joint Statement on Access to Controlled Medicines in Emergencies*. 2021.

¹³² Ibid.

¹³³ Sopha et al. *Human resource allocation for humanitarian organizations: a systemic perspective*. 2018. p. 1.

¹³⁴ Ibid.

¹³⁵ United Nations, General Assembly, Economic and Social Council. *Strengthening of the coordination of emergency humanitarian assistance of the United Nations (A/76/74-E/2021/54)*. 2021. p. 3.

¹³⁶ Scott. Organisation for Economic Co-operation and Development. *Financing in Crisis? Making Humanitarian Finance Fit for the Future*. 2015. p. 1.

¹³⁷ Ibid. p. 7.

¹³⁸ United Nations, General Assembly, Economic and Social Council. *Strengthening of the coordination of emergency humanitarian assistance of the United Nations (A/76/74-E/2021/54)*. 2021. p. 3.

¹³⁹ United Nations Office on Drugs and Crime. *65th session of Commission on Narcotic Drugs discusses implementation of drug policy commitments*. 2022.

¹⁴⁰ Augier. The Alliance for International Medical Action. *Improving medical care during humanitarian crises*. 2018.

¹⁴¹ Ibid.

¹⁴² Brooks. University of York. *Financial resources: what are they and how are they managed?* 2023.

¹⁴³ United Nations, High-Level Panel on Humanitarian Financing. *Too important to fail: addressing the humanitarian financing gap: report to the United Nations Secretary-General*. 2016. p. 17.

¹⁴⁴ Ibid.



Office for the Coordination of Humanitarian Affairs established the Financial Tracking Service (FTS) as a tool that provides data on the financing of humanitarian relief.¹⁴⁵ The FTS collects data from donors, governments, and other organizations on humanitarian relief financing and ensures it is available to the public through the FTS website.¹⁴⁶ It strives to improve the flow of information between humanitarian organizations and donors so they can make better decisions about how to allocate resources.¹⁴⁷ Other United Nations-related initiatives focused on improving finance for access to controlled medicines in emergencies include the Central Emergency Response Fund (CERF), established by the General Assembly in 2005.¹⁴⁸ CERF collects donations worldwide into a single fund and distributes them at the most crucial stage of an emergency to save lives and reach millions of people affected by catastrophes and conflicts, including giving them access to controlled medications.¹⁴⁹

One example of a public-private partnership fund is the Global Health Innovative Technology (GHIT) Fund, established in 2006 as a partnership between the United Nations Development Programme, the government of Japan, multiple pharmaceutical TNCs, and NGOs.¹⁵⁰ The Fund aims to aid emergencies, particularly in developing countries, and has supported accelerating the development and delivery of new health technologies to produce vital medicines.¹⁵¹ Furthermore, the FinRef Initiative is a partnership between WHO and the GHIT Fund that aims to improve the financing of medicines for refugees due to emergencies.¹⁵² The FinRef Initiative develops several innovative financing mechanisms, such as risk insurance, to provide controlled medication to refugees.¹⁵³ Risk insurance helps Member States plan for and recover from emergencies and properly allocate their resources by combining the resources of various stakeholders to distribute the financial burden.¹⁵⁴ As a result, communities are more resilient to vulnerabilities, such as climate change and health-related emergencies.¹⁵⁵

Conclusion

CND strives to ensure access to controlled medicines in emergencies, but regulations, supply chain challenges, and lack of funds make it difficult to mobilize controlled medicines for humanitarian aid effectively and can increase the demand for controlled medication.¹⁵⁶ CND has created multiple initiatives, such as *The Implementation of All International Drug Policy Commitments* (2019), to raise awareness and increase emergency access to controlled medicines.¹⁵⁷ Efficient supply chains can guarantee that patients have timely access to essential controlled medications.¹⁵⁸ Furthermore, as the demand for humanitarian aid is growing, the amount of funds available to meet this demand is decreasing at the same rate, creating challenges to supplying humanitarian relief, such as controlled medications.¹⁵⁹

¹⁴⁵ Ibid. p. 18.

¹⁴⁶ United Nations Office for the Coordination of Humanitarian Affairs. *About FTS: Using FTS data*. 2023.

¹⁴⁷ Ibid.

¹⁴⁸ United Nations Office for the Coordination of Humanitarian Affairs. *Central Emergency Response Fund (CERF)*. 2023.

¹⁴⁹ Ibid.

¹⁵⁰ Global Health Technologies Coalition. *Global Health Technologies Coalition Fund*. 2023.

¹⁵¹ Ibid; Global Health Technologies Coalition. *Our Focus*. 2023.

¹⁵² Spiegel et al. BMC Medicine. *Innovative health financing for refugees*. 2018.

¹⁵³ Ibid.

¹⁵⁴ United Nations Development Programme. *UNDP Insurance and Risk Finance Facility: Protecting Lives, Building Resilience and Driving Inclusive Economic Growth*. 2023. p. 2.

¹⁵⁵ Ibid.

¹⁵⁶ World Health Organization. *Model Guidelines for the International Provision of Controlled Medicines for Emergency Medical Care*. 1996.

¹⁵⁷ United Nations, Commission on Narcotic Drugs. *Implementation of all International Drug Policy Commitments*. 2019.

¹⁵⁸ United Nations Office on Drugs and Crime. *Technical Guidance: Increasing Access and Availability of Controlled Medicines*. 2018. p. 17.

¹⁵⁹ Scott. Organisation for Economic Co-operation and Development. *Financing in Crisis? Making Humanitarian Finance Fit for the Future*. 2015.



Further Research

As delegates conduct further research and consider how to address this topic, they should consider: How can international policy be drafted to reduce regulatory trade procedures while ensuring the national sovereignty of Member States? How can potential shortages be predicted and addressed? How can Member States address gaps in global humanitarian aid to ensure access to controlled medications in emergencies?



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2. Measures to Protect Children and Young People from Drug Abuse

*"We are united in the urgency to protect people and leave no one behind. Crises have exposed our societies, and their most vulnerable members, to greater threats of crime, drugs, corruption, terrorism and exploitation."*¹⁶⁰

Introduction

The 21st century has been marked by a supply-driven expansion of the drug market, with the production of drugs like opium and cocaine at the highest levels ever recorded.¹⁶¹ Despite successes in shutting down prominent online trading platforms, marketplaces for drugs are expanding outside their traditional scope, such as within open-air markets and locations, facilitating access to children and young people.¹⁶² This age group's physiological and psychological fragility makes them highly sensitive to substances and more vulnerable to the adverse consequences of drug use.¹⁶³ Drug use can have serious and long-term ramifications for their physical, mental, and emotional development.¹⁶⁴

Current international drug control treaties fail to define drug abuse due to its complex nature, making it challenging to create a comprehensive global definition that accommodates diverse cultural, medical, and social perspectives.¹⁶⁵ Instead, they refer to a number of concepts, such as abuse, misuse, and illicit use.¹⁶⁶ According to the World Health Organisation's (WHO) *Lexicon of Alcohol and Drug Terms*, drug abuse constitutes the use of any substance under international control for other than medical or scientific purposes, including the use without a prescription, in excessive dosages, or over an unjustified period of time.¹⁶⁷ Moreover, when talking about youth or young people, the United Nations Commission on Narcotic Drugs (CND) references the definition by the World Programme of Action for Youth (WPAY) to the Year 2000 and Beyond, which defines them as persons between the ages of 15 and 24 years, without prejudice to others.¹⁶⁸ In the case of children, CND refers to Article 1 of the United Nations *Convention on the Rights of the Child* (1989), a guiding document that sets out the civil, political, economic, social, health, and cultural rights of children, in which "children" are defined as persons up to the age of 18.¹⁶⁹

Faced with poverty and a lack of opportunity for social and economic progress, many young people engage in the drug supply chain as low-level couriers and dealers.¹⁷⁰ In addition, online marketplaces have made it easier for youth to discreetly access and distribute drugs.¹⁷¹ Organized criminal syndicates and gangs often prefer to recruit children and young people for drug trafficking due to two reasons: the recklessness associated with younger age groups that make them underestimate the legal consequences and their compliance.¹⁷² To protect the well-being of children and young people, comprehensive measures must be implemented to address the root causes of drug misuse, offering effective prevention and intervention programs, and create social and economic opportunities for youth, preventing them from becoming targets of and involved with organized crime.¹⁷³

¹⁶⁰ United Nations Office on Drugs and Crime. *Secretary-General Annual Report: Drug Control, Crime Prevention and Combating Terrorism*. 2022. p. 113.

¹⁶¹ United Nations Office on Drugs and Crime. *World Drug Report: Chapter 4*. 2018.

¹⁶² Ibid.

¹⁶³ Ibid.

¹⁶⁴ Ibid.

¹⁶⁵ World Health Organisation. *Lexicon of Alcohol and Drug Terms*. 1994.

¹⁶⁶ Ibid.

¹⁶⁷ Ibid.

¹⁶⁸ United Nations, General Assembly. *World Programme of Action for Youth (WPAY)*. 2010.

¹⁶⁹ United Nations, General Assembly. *Convention on the Rights of the Child (A/RES/44/25)*. 1989.

¹⁷⁰ United Nations Office on Drugs and Crime. *World Drug Report: Executive Summary*. 2018.

¹⁷¹ Ibid.

¹⁷² Ibid.

¹⁷³ Ibid.



International and Regional Framework

The global framework addressing illicit drugs relies on key agreements and conventions to address issues related to illegal drug trade and abuse like the *Single Convention on Narcotic Drugs* (Single Convention) (1961), the *Convention on Psychotropic Substances* (1971), and the *Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances* (1988).¹⁷⁴ The objective of the Single Convention, adopted in 1961 by the United Nations Conference on Narcotic Drugs, is to confine the ownership, use, trade, distribution, import, export, creation, and production of drugs exclusively to medical and scientific purposes.¹⁷⁵ In addition, the convention aimed to counter drug trafficking by fostering international collaboration to discourage illicit drug trade.¹⁷⁶ The *Convention on Psychotropic Substances* aims to limit the abuse of certain psychotropic substances and functions as an addition to the Single Convention.¹⁷⁷ The *Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances* implements comprehensive measures to counter drug trafficking, money laundering, and the misuse of chemicals.¹⁷⁸ Additionally, it facilitates international cooperation through various means, such as the extradition of drug traffickers and controlled deliveries of chemicals.¹⁷⁹ The United Nations has increased efforts to address the matter of substance abuse amongst the youth population since it may have “negative physiological and psychological health effects” and the youth population is especially vulnerable.¹⁸⁰

Protecting children is an essential global priority, recognizing their vulnerability and the critical importance of their well-being.¹⁸¹ The *Convention on the Rights of the Child*, adopted by General Assembly resolution 44/25 (1989), states in Article 33 that children need to be protected from narcotic drugs and psychotropic substances.¹⁸² The article also highlights the need to prevent children from being used in the production and trafficking of narcotic drugs and psychotropic substances.¹⁸³ In 1990, the General Assembly adopted the *Guidelines for the Prevention of Juvenile Delinquency* (The Riyadh Guidelines), which emphasize the need for educators and other professionals to be prepared and trained to prevent and deal with young people abusing alcohol, drugs, and other substances.¹⁸⁴ It further advocates sharing information with the student body in schools, as it allows for the creation of peer support groups that can foster positive social connections and reduce the risk of peer pressure to engage in drug use.¹⁸⁵ Marking the tenth anniversary of the International Youth Year, an event aimed to draw awareness to youth-related concerns and issues, the General Assembly adopted the *World Programme of Action for Youth* policy framework in 1995.¹⁸⁶ WPAY encompasses 15 key areas of focus concerning youth and presents concrete action proposals for each of these areas.¹⁸⁷ One of the key areas recognizes the necessity of youth drug abuse prevention,

¹⁷⁴ United Nations Conference for the Adoption of a Single Convention on Narcotic Drugs. *Single Convention on Narcotic Drugs, 1961 (as amended by the 1972 Protocol amending the Single Convention on Narcotic Drugs, 1961)*. 1961; United Nations Conference for the Adoption of a Protocol on Psychotropic Substances. *Convention on Psychotropic Substances*. 1971; United Nations Conference for the Adoption of a Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances. *United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances*. 1988.

¹⁷⁵ Ibid.

¹⁷⁶ Ibid.

¹⁷⁷ United Nations Conference for the Adoption of a Protocol on Psychotropic Substances. *Convention on Psychotropic Substances*. 1971.

¹⁷⁸ United Nations Conference for the Adoption of a Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances. *United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances*. 1988.

¹⁷⁹ Ibid.

¹⁸⁰ United Nations, Department of Economic and Social Affairs. *Substance Abuse*. N.d.

¹⁸¹ United Nations, General Assembly. *Convention on the Rights of the Child (A/RES/44/25)*. 1989.

¹⁸² Ibid.

¹⁸³ Ibid.

¹⁸⁴ United Nations General Assembly. *Guidelines for the Prevention of Juvenile Delinquency (The Riyadh Guidelines)*. 1990.

¹⁸⁵ Ibid.

¹⁸⁶ United Nations, General Assembly. *World Programme of Action for Youth*. 2010.

¹⁸⁷ United Nations, Department of Economic and Social Affairs. *World Program of Action for Youth*. N.d.



and actively encourages and supports initiatives led by young people in their efforts to combat drug misuse.¹⁸⁸

Protecting children and young people from drug abuse is also reflected in the *2030 Agenda for Sustainable Development* (2015) and its 17 Sustainable Development Goals (SDGs), specifically SDG 3 (good health and wellbeing) target 3.5 to “strengthen the prevention and treatment of substance abuse, including narcotic drug abuse and harmful use of alcohol.”¹⁸⁹ Furthermore, SDG 1 (no poverty) is of importance due to the relationship between economic development and drugs, and the strong link between drug abuse and poverty, which is acknowledged by CND.¹⁹⁰ In the area of drug control, SDG 17 (partnerships for the goals) is of relevance as cooperation between various stakeholders is promoted by United Nations entities.¹⁹¹ CND promotes SDG 17 (partnerships for the goals) by engaging various United Nations entities, organizations, and non-governmental organizations (NGOs) in its meetings through offering webcasts, which facilitate the participation of other stakeholders.¹⁹² CND holds parallel Youth and Scientific Forums.¹⁹³ The forum’s outcomes inform CND’s discussions and strengthen the collaboration with other Economic and Social Council (ECOSOC) commissions, by, for example, organizing special events with the Commission on Crime Prevention and Criminal Justice.¹⁹⁴

Role of the International System

In its role as central narcotics policy-making body, CND regularly adopts resolutions that aim to provide Member States and other stakeholders with policy guidance and research.¹⁹⁵ CND resolution 59/5 (2016) on “Mainstreaming a gender perspective in drug-related policies and programmes” discusses the special vulnerability of women relating to rehabilitation and prevention, and encourages Member States to take a gender-specific approach when establishing drug policies or programs.¹⁹⁶ In 2017, CND adopted resolution 60/7 on “Promoting scientific evidence-based community, family and school programs and strategies to prevent drug use among children and adolescents” to promote community, family, and school programs and prevention strategies.¹⁹⁷ In 2018, CND adopted resolution 61/9 on “Protecting children from the illicit drug challenge” asking Member States to take action to protect children from dangers related to illicit drugs, including enforcing existing international legal instruments and creating drug control strategies that take into account children’s age and gender.¹⁹⁸ Furthermore, it calls on

¹⁸⁸ Ibid.

¹⁸⁹ United Nations, Department of Economic and Social Affairs. *United Nations Office on Drugs and Crime (UNODC)*. 2019; United Nations, Department of Economic and Social Affairs. Goal 3: Ensure healthy lives and promote well-being for all at all ages. N.d.

¹⁹⁰ United Nations, Department of Economic and Social Affairs. *Note by the Chair of the sixtieth session of the Commission on Narcotic Drugs on the contribution of the Commission to the 2017 High-level Political Forum on Sustainable Development on “Eradicating poverty and promoting prosperity in a changing world”*. 2017. p. 3.

¹⁹¹ Ibid. pp. 2-3.

¹⁹² Ibid. pp. 2-3.

¹⁹³ United Nations Office on Drugs and Crime. *SDG 17: Strengthen the means of implementation and revitalize the global partnership for sustainable development*. N.d.

¹⁹⁴ Ibid.

¹⁹⁵ United Nations, Commission on Narcotic Drugs. *Promoting scientific evidence-based community, family and school programmes and strategies for the purpose of preventing drug use among children and adolescents (E/CN.7/2017/L.11/REV.1)*. 2017.

¹⁹⁶ United Nations, Commission on Narcotic Drugs. *Mainstreaming a gender perspective in drug-related policies and programmes*. 2016.

¹⁹⁷ United Nations, Commission on Narcotic Drugs. *Promoting scientific evidence-based community, family and school programmes and strategies for the purpose of preventing drug use among children and adolescents (E/CN.7/2017/L.11/REV.1)*. 2017.

¹⁹⁸ United Nations, Commission on Narcotic Drugs. *Protecting children from the illicit drug challenge (61/9)*. 2018.



Member States to strengthen the criminal justice response to those who involve children in drug-related crimes and requests reporting on the resolution's implementation.¹⁹⁹

The International Narcotics Control Board (INCB), established in 1968, is responsible for monitoring the enforcement of the United Nations international drug control conventions.²⁰⁰ INCB operates independently but closely collaborates with United Nations entities, particularly the United Nations Office on Drugs and Crime (UNODC), to coordinate international drug control efforts, including data collection, research, and sharing best practices, which was encouraged as a focus area in CND resolution 61/9.²⁰¹ INCB submits an annual report to ECOSOC containing a comprehensive overview and assessment of the global drug control situation.²⁰² Its latest annual report underscores the existing gaps in the use of opioid analgesics for pain management and psychotropic substances for mental health treatment and addresses the danger of advertising legal drugs aimed at children and youth.²⁰³

UNODC is tasked with responding to issues related to threats such as the production, trade, and distribution of illegal drugs, organized crime, corruption, and terrorism.²⁰⁴ UNODC has emphasized the importance of targeting drug use prevention measures to specific age groups, including children and youth.²⁰⁵ The Youth Initiative of UNODC focuses on preventing drug use among young individuals and encouraging healthy lifestyles.²⁰⁶ It actively backs youth-led initiatives, offers information and resources, and advocates for the active participation of young people in drug prevention.²⁰⁷ The initiative shares youth action articles to highlight accomplishments in drug prevention, health promotion, and youth empowerment led by and focused on young individuals originating from various regions.²⁰⁸

UNODC and the United Nations Children's Fund (UNICEF) collaborate to improve child justice by enhancing the capacity of law enforcement, social workers, and legal professionals to deal with child witnesses and victims in legal matters.²⁰⁹ Furthermore, UNICEF published its research on *The Prevalence of Alcohol and Substance Use Among Young Refugees and Migrants in Serbia and Psychological Correlates* (2021).²¹⁰ UNICEF acknowledges that young refugees and migrants may be especially vulnerable to drug abuse, because of the prevalent stress and trauma they face, like losing their homes and livelihoods as well as exposure to violence, torture, and family separations.²¹¹ The study calls for actions to prevent substance abuse among young refugees and migrants, such as alcohol and substance prevention workshops.²¹²

WHO together with UNODC developed the *International Standards on Drug Use Prevention* (2020).²¹³ The document emphasizes the importance of evidence-based prevention strategies involving families,

¹⁹⁹ Ibid.

²⁰⁰ International Narcotics Control Board. *Mandate and Functions*. 2023.

²⁰¹ United Nations, Commission on Narcotic Drugs. *Protecting children from the illicit drug challenge* (61/9). 2018.

²⁰² International Narcotics Control Board. *Mandate and Functions*. 2023.

²⁰³ United Nations, International Narcotics Control Board. *Report 2022*. 2023. p. 3.

²⁰⁴ United Nations Office on Drugs and Crime. *About the United Nations Office on Drugs and Crime*. N.d.

²⁰⁵ United Nations Office on Drugs and Crime. *UNODC/WHO International Standards on Drug Use Prevention*. 2020.

²⁰⁶ United Nations Office on Drugs and Crime. *Youth Initiative*. N.d.

²⁰⁷ Ibid.

²⁰⁸ United Nations Office on Drugs and Crime. *Youth Initiative: Continuing the Momentum for drug prevention in Montenegrin youth*. 2023.

²⁰⁹ United Nations Office on Drugs and Crime. *UNICEF and UNODC partner to promote justice for children*. 2011.

²¹⁰ United Nations Children's Fund. *The Prevalence of Alcohol and Substance Use Among Young Refugees and Migrants in Serbia and Psychological Correlates*. 2021. p. 11.

²¹¹ Ibid.

²¹² Ibid. pp. 14-17.

²¹³ United Nations Office on Drugs and Crime. *UNODC/WHO International Standards on Drug Use Prevention*. 2020.



schools, and communities to ensure the well-being of children, especially of the most marginalized.²¹⁴ The document also highlights the possibility for substantial cost savings, potentially at a ten-to-one ratio, in future health, social, and crime-related expenses.²¹⁵ To provide guidance to Member States on effective prevention approaches, UNODC has developed international standards on drug use prevention, which promote evidence-based prevention programs.²¹⁶

The General Assembly addresses the world drug problem by adopting resolutions on “International cooperation to address and counter the world drug problem,” with resolution 76/188 (2021) being the most recent.²¹⁷ The resolution calls upon Member States to work together effectively and take practical steps.²¹⁸ The resolution encourages countries to prioritize drug abuse prevention, promote fair and non-discriminatory treatment, address root causes of drug production particularly among children and youth, and foster international cooperation.²¹⁹

At the regional level, the European Monitoring Centre for Drugs and Drug Addiction is an agency of the European Union (EU) that contributes to safeguarding Europe’s citizens from drug-related harms by impacting policies at the national and EU levels.²²⁰ The agency has a focus on young people and therefore, shapes policies related to prevention and education.²²¹ For example, the agency’s research and recommendations lead to the development of educational programs targeting young people to prevent substance abuse and provide support for those at risk.²²² The *Regional Framework for the Arab States 2023-2028* is a strategic plan for cooperation between UNODC, 18 Member States, and the League of Arab States.²²³ It aims to improve peace, security, human rights, and development by addressing drug-related issues, crime, corruption, and terrorism while advancing the SDGs by 2030.²²⁴ The UNODC Regional Office for Southeast Asia and the Pacific addresses the surge in synthetic drug production in Southeast Asia, notably methamphetamine in northern Myanmar, making it the world’s largest methamphetamine market with record seizures, totaling 126 tons in 2018.²²⁵ The Association of Southeast Asian Nations (ASEAN) released the *ASEAN Work Plan on Securing Communities Against Illicit Drugs 2016-2025* focusing on “preventive education, law enforcement, treatment and rehabilitation, research and alternative development.”²²⁶ Measures taken include school programs, legislative measures, community-based programs, and sharing best practices.²²⁷ The West Africa Drug Policy Network, established in 2015, is a coalition of civil society organizations (CSOs) in the West African region.²²⁸ Its primary aim is to promote drug policy reform by empowering local CSOs to address the effects of drug markets on democracy, governance, human security, human rights, and public health.²²⁹

²¹⁴ Ibid.

²¹⁵ Ibid.

²¹⁶ Ibid.

²¹⁷ United Nations, General Assembly. *International cooperation to address and counter the world drug problem (A/RES/76/188)*. 2022.

²¹⁸ Ibid.

²¹⁹ Ibid.

²²⁰ European Union, European Monitoring Centre for Drugs and Drug Addiction. *About the EMCDDA*. N.d.; European Union, European Monitoring Centre for Drugs and Drug Addiction. *Young people and drugs*. N.d.

²²¹ Ibid.

²²² Ibid.

²²³ United Nations Office on Drugs and Crime. *Regional Framework for the Arab States 2023-2028*. N.d.

²²⁴ Ibid.

²²⁵ United Nations Office on Drugs and Crime Regional Office for Southeast Asia and the Pacific. *Drugs and Precursors*. N.d.

²²⁶ Association of Southeast Asian Nations. *Illicit Drugs: Overview*. 2020.

²²⁷ Ibid.

²²⁸ West Africa Drug Policy Network. *About us*. 2023.

²²⁹ Ibid.



Providing Effective Preventive Interventions

Preventive interventions are those that seek to improve public health by focusing on scientifically derived determinants of drug use behavior, which encompasses consumption of drugs, factors that influence drug use, frequency of use, and any associated behaviors or consequences.²³⁰ However, a significant gap still exists due to the lack of a comprehensive approach to drug use prevention that takes into account applicable human rights obligations, such as the rights of children.²³¹

In 2016, CND passed resolution 59/6 on “Promoting Prevention Strategies and Policies,” which states that effective preventive interventions play a key role in ensuring individuals’ well-being and promoting a healthy, drug-free lifestyle, especially among children and youth.²³² Furthermore, in resolution 59/6 (2016) on “Promoting Prevention Strategies and Policies,” CND emphasizes the important role media plays in informing the public on prevention measures through different approaches, such as social media.²³³ Interventions can involve media campaigns, the provision of alternative activities, the dissemination of information on the risks of drugs, life skills education in schools, and family and parenting skill training.²³⁴ According to CND resolution 61/9 (2018) on “Protecting children from the illicit drug challenge,” the nature of children’s physical and mental immaturity and vulnerability requires specific precautions, care, and protection against the dangers, risks, and repercussions of illicit drug use and trafficking.²³⁵

Preventive interventions based on scientific evidence that work with families, schools, and communities help ensure that children and youth, particularly the most disadvantaged and poor, grow and remain healthy and safe throughout adulthood and old age.²³⁶ Courageous Parenting 101, a program launched by the Courage to Speak Foundation, is designed to help parents understand the impact of drug addiction on children and provide them with the knowledge needed to speak more effectively with their children about the risks of drugs.²³⁷ Moreover, these interventions exhibit remarkable cost efficiency, as in accordance with the *UNODC/WHO International Standards on Drug Use Prevention* (2020), each dollar invested in prevention today has the potential to prevent ten dollars in future expenditures related to health, social, and crime issues.²³⁸

In 2014 UNODC released a report, *Preventing Illicit Drug Use and Treating Drug Use Disorders for Children and Adolescents*, which led to the development of the Children’s Program GLOK42 in light of the significance preventative interventions have.²³⁹ It encourages a globally coordinated response to children and adolescents at risk of taking drugs and youth impacted by drug use dependence.²⁴⁰ The program also provides technical assistance to local and national authorities to develop a coordinated system of cohesive and complementary actions, rather than various fragmented efforts to meet the demands of people at risk of falling into the drug abuse cycle, particularly children, adolescents, and those affected by

²³⁰ United Nations Office on Drugs and Crime. *UNODC Prevention, Treatment and Rehabilitation Section*. N.d.

²³¹ Ibid.

²³² United Nations, Commission on Narcotic Drugs. *Promoting Prevention Strategies and Policies* (59/6). 2016.

²³³ Ibid.

²³⁴ United Nations Office on Drugs and Crime. *UNODC Prevention, Treatment and Rehabilitation Section*. N.d.

²³⁵ United Nations, Commission on Narcotic Drugs. *Protecting children from the illicit drug challenge* (61/9). 2018.

²³⁶ United Nations Office on Drugs and Crime. *UNODC/WHO International Standards on Drug Use Prevention*. 2020.

²³⁷ Courage to Speak Foundation. *Courage Parenting 101: Drug Prevention Education Program for Parents*. 2023.

²³⁸ United Nations Office on Drugs and Crime. *UNODC/WHO International Standards on Drug Use Prevention*. 2020.

²³⁹ United Nations Office on Drugs and Crime. *Children’s Program (GLOK42)*. 2014.

²⁴⁰ Ibid.



drug dependence.²⁴¹ At the 2016 United Nations General Assembly Special Session, UNODC initiated the Listen First Campaign, a global initiative using the hashtag #ListenFirst, which aims to bring attention to science-based drug prevention, an approach to preventing substance abuse and drug-related problems grounded in scientific research and evidence-based strategies.²⁴² It raises awareness for the need to listen to children and youth as a first step to help them grow healthy and safely, aligned with CND resolution 59/6.²⁴³ It brings attention to the consequences of drug use on physical health, mental well-being, and future opportunities.²⁴⁴

To address the underlying mental health issues associated with drug abuse and deter young people from using drugs as a coping mechanism, WHO launched the Helping Adolescents Thrive Initiative in 2020 in collaboration with UNICEF to promote mental health.²⁴⁵ A toolkit was released as part of the initiative to provide guidelines on preventive mental health interventions for adolescents and foster an environment that prevents self-harm and other risk behaviors, such as the harmful use of alcohol and drugs.²⁴⁶ The toolkit comprises evidence-based strategies for safeguarding and enhancing adolescent mental health and provides guidance on law enforcement inclusion, supportive environments, caregiver assistance, and psychosocial interventions with real-world program examples from various regions.²⁴⁷

Children and Young People in Drug Trade

Children's involvement in the drug trade is frequently the result of social, economic, and political factors that predispose them to exploitation.²⁴⁸ Implementing strong measures to safeguard children and young people from drug use is essential, as they are susceptible to exploitation by actors involved in the drug trade due to their vulnerability and, in many cases, a lack of understanding about the potential dangers.²⁴⁹ Children's involvement in drug-related activities is a result of their susceptibility, poverty, and the lack of opportunities.²⁵⁰ In response, the International Labor Organization's (ILO) *Convention Concerning the Prohibition and Immediate Action for the Elimination of the Worst Forms of Child Labour* (Convention C182) (1999) was adopted, which calls upon Member States to take immediate action to eliminate exploitative practices associated with drug trafficking.²⁵¹ The convention highlights the need to ensure access to education and vocational opportunities that provide viable alternatives and equip children with skills needed for a better future.²⁵² By promoting a legal framework and measures against child labor, ILO aims to break the cycle of exploitation that fuels the involvement of children in the drug trade.²⁵³ It prompted numerous Member States to pass and enforce legislation, increase awareness, and create initiatives to combat children's involvement in the drug trade.²⁵⁴ However, limited enforcement and obstacles related to poverty and limited access to education have made it challenging to achieve the goals set in the convention.²⁵⁵

UNODC published the *Handbook on Children Recruited and Exploited by Terrorist and Violent Extremist Groups* (2017) to equip Member States with essential resources, such as strategies and case studies, to

²⁴¹ Ibid.

²⁴² United Nations Office on Drugs and Crime. *Listen First*. 2016.

²⁴³ Ibid.

²⁴⁴ Ibid.

²⁴⁵ World Health Organization. *WHO-UNICEF Helping Adolescents Thrive Initiative*. 2020.

²⁴⁶ Ibid.

²⁴⁷ Ibid.

²⁴⁸ United Nations Office on Drugs and Crime. *Handbook on Children Recruited and Exploited by Terrorist and Violent Extremist Groups*. 2017.

²⁴⁹ Open Society Foundation. *The impacts of drug policies on children and young people*. 2015.

²⁵⁰ International Labour Organization. *Convention C182: Worst Forms of Child Labour Convention*. 1999.

²⁵¹ Ibid.

²⁵² Ibid.

²⁵³ Ibid.

²⁵⁴ International Labour Organization. *ILO Child Labour Convention achieves universal ratification*. 2020.

²⁵⁵ Ibid.



intervene and prevent child recruitment in the drug trade.²⁵⁶ It also offers guidelines and strategies for rehabilitating affected children, reintegrating them into society, and shielding them from the influence of the drug trade.²⁵⁷ Conflict and instability in certain regions exacerbate the recruitment of children and young people for drug trafficking.²⁵⁸ UNICEF's Children Not Soldiers campaign aims to end the recruitment and employment of children in armed conflicts, many of which are tied to the drug trade, by advocating measures that safeguard young people from becoming targets of armed groups involved in drug trafficking.²⁵⁹ The campaign collaborates with governments, armed forces, and NGOs to prosecute individuals who forcibly recruit children into drug-trafficking-related armed groups and create secure environments for children so they can grow without fear of exploitation.²⁶⁰

In the battle against children's involvement in the drug trade, educational and occupational opportunities are vital tools for empowering young minds.²⁶¹ Thus, UNODC initiated the Education for Justice Initiative, which aims to promote a culture of lawfulness, prevent crime and corruption, and equip children and young people with the means to resist the allure of drug trade-related activities.²⁶² Along with it, UNODC developed the Line Up Live Up initiative, which aims to empower at-risk children through sports and life skills training so they reject involvement in drug trafficking and other criminal activities.²⁶³ Local organizations like the Instituto Companheiros das Américas, a Brazilian NGO, have adapted this initiative to suit their contextual needs by linking sports with training in employability and entrepreneurial skills for disadvantaged youth.²⁶⁴ This effort seeks to provide young people with the abilities required to access job opportunities or reintegrate into formal education, bolstering their resilience against crime and violence while benefiting the broader community.²⁶⁵

Conclusion

It is crucial to recognize the importance of tackling drug abuse among young people within the broader context of crime prevention and criminal justice.²⁶⁶ Protecting children and young people from drug abuse requires a multi-faceted approach that involves the active participation of families, schools, communities, and government agencies.²⁶⁷ By promoting education and awareness, strengthening parental guidance, restricting access, fostering community support, addressing mental health, promoting digital literacy, and offering early intervention and treatment, a safer environment can be created for the younger generation to grow and flourish.²⁶⁸ CND's work highlights the need for special precautions, care, and protection to safeguard children from the risks and consequences of illicit drug use and trafficking, given their physical and mental immaturity and vulnerability.²⁶⁹ UNODC has created global guidelines for drug use prevention

²⁵⁶ United Nations Office on Drugs and Crime. *Handbook on Children Recruited and Exploited by Terrorist and Violent Extremist Groups*. 2017.

²⁵⁷ Ibid.

²⁵⁸ United Nations Children's Fund. *Children, Not Soldiers*. 2014.

²⁵⁹ Ibid.

²⁶⁰ Ibid.

²⁶¹ United Nations Office on Drugs and Crime. *Education for Justice (E4J) Initiative*. 2016.

²⁶² Ibid.

²⁶³ United Nations Office on Drugs and Crime. *'Line Up, Live Up' Initiative*. 2016.

²⁶⁴ United Nations Office on Drugs and Crime. *UNODC grants initiative helps Brazilian NGOs use sport to help youth stay away from crime*. 2018.

²⁶⁵ Ibid.

²⁶⁶ United Nations, Commission on Narcotic Drugs. *Promoting prevention of drug abuse based on scientific evidence as an investment in the well-being of children, adolescents, youth, families and communities (57/3)*. 2014.

²⁶⁷ Ibid.

²⁶⁸ Ibid.

²⁶⁹ United Nations, Commission on Narcotic Drugs. *Protecting children from the illicit drug challenge (61/9)*. 2018.



to assist Member States in adopting effective prevention strategies.²⁷⁰ These guidelines advocate for the implementation of evidence-based prevention programs.²⁷¹

Further Research

As delegates conduct further research and consider how to address this topic, they should address the following questions: What are the most significant risk factors associated with drug abuse among children and young people? How can early identification of these factors help in targeted prevention efforts? What preventive measures can be implemented to protect children and youth from exposure to drug-related content and peer pressure? How can the root causes of drug abuse be further addressed?

²⁷⁰ United Nations Office on Drugs and Crime. *UNODC/WHO International Standards on Drug Use Prevention*. 2020.

²⁷¹ Ibid.



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