Dear Delegates,

Welcome to the 2022 National Model United Nations New York Conference (NMUN•NY)! We are pleased to introduce you to our committee, the United Nations Commission on Narcotic Drugs (CND) This year’s staff are: Directors Genevieve Verville (Conference A) and Kenny Nguyen (Conference B), and Assistant Directors Julien Nelson (Conference A) and Luke Glasspool (Conference B). Genevieve has a Bachelor of Science in Chemistry with a triple minor in biological sciences, mathematics, and psychology from the University of Mississippi and currently works as a research assistant at the University of Maryland School of Medicine. Kenny completed his Bachelors of Arts in Political Science and Communication from the University of Colorado at Boulder and is currently an Executive Assistant to Colorado’s Lieutenant Governor. Julien has a Bachelors of Arts in International Relations and Public Affairs from Laval University and is currently in a Masters in International Relations. He currently works as an intern in federal Public Safety and Security. Luke recently graduated from Royal Holloway, University of London, with a Bachelors of Arts in History, Politics, and International Relations, and is currently in a Masters of Arts in Legal and Political Theory at University College London.

The topics under discussion for CND are:
1. The Emerging Challenges of Synthetic Drug Trafficking
2. Incorporating a Human Rights Focus into International Drug Policies

As a functional commission of the Economic and Social Council, the Commission on Narcotic Drugs (CND) is the main United Nations (UN) body in charge of the international drug control framework. The CND’s main tasks include monitoring and assessing the world drug problem, implementing international drug strategy, and adopting measures for supply reduction and alternative development. The body works to find holistic global solutions for the challenges that drug use and trafficking present to the international community.

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 Annotated Bibliography and Bibliography to further your knowledge on these topics. In preparation for the Conference, each delegation will submit a Position Paper by 11:59 p.m. (Eastern) on 1 March 2022 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:
1. **NMUN Delegate Preparation Guide** - 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. Delegates should not start discussion on the topics with other members of their committee until the first committee session.
2. **NMUN Rules of Procedure** - include 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 the committee or the Conference itself, please contact the der-Secretaries-General for the Economic and Social Council Department, Lauren Kiser (Conference A) and Eileen Austin (Conference B), at usg.ecosoc@nmun.org

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

Sincerely,

**Conference A**
Genevieve A. Verville, **Director**
Julien Nelson, **Assistant Director**

**Conference B**
Kenny Van Nguyen, **Director**
Luke Glasspool, **Assistant Director**
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United Nations System at NMUN•NY

This diagram illustrates the UN system simulated at NMUN•NY and demonstrates 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 UN system.

- **General Assembly**
- **Subsidiary Bodies**
  - GA First – Disarmament and International Security
  - GA Second – Economic and Financial
  - GA Third – Social, Humanitarian, and Cultural
  - HRC – Human Rights Council
- **Security Council**
- **Economic and Social Council**
- **Secretariat**
- **International Court of Justice**
- **Trusteeship Council**

- **Funds and Programmes**
  - UNDP – UN Development Programme
  - UNEA – UN Environment Assembly
  - UN-Habitat – UN Human Settlements Programme
  - UNICEF – The UN Children’s Fund
- **Functional Commissions**
  - CND – UN Commission on Narcotic Drugs
  - CSocD – UN Commission for Social Development
  - CSW – UN Commission on the Status of Women
- **Regional Commissions**
  - ECLAC – UN Economic Commission for Latin America and the Caribbean
- **Specialized Agencies**
  - UNESCO – UN Educational, Scientific and Cultural Organization
  - FAO – Food and Agriculture Organization of the United Nations
- **Other Entities**
  - UNRWA – The UN Relief and Works Agency for Palestine Refugees in the Near East
  - UN Women – The UN Entity for Gender Equality and the Empowerment of Women
- **Related Organizations**
  - IAEA – International Atomic Energy Agency
  - IOM – International Organization for Migration
Committee Overview

Introduction

In the context of modern international drug control, a “drug” is any substance placed in schedule I or II of the 1961 Single Convention on Narcotic Drugs. The United Nations (UN) Office on Drugs and Crime (UNODC) defines a drug in pharmacological terms, stating, “any chemical agent that alters the biochemical or physiological processes of tissues or organisms.” International efforts and treaties to control narcotics predate the UN. In 1912, the International Opium Convention was signed at The Hague, and adherence to its provisions was built into the Treaty of Versailles, which ended the First World War in 1919. The newly established League of Nations took over international narcotics control, primarily through the Advisory Committee on the Traffic in Opium and Other Dangerous Drugs. The signature achievement of this committee was the 1933 Convention for Limiting the Manufacture and Regulating the Distribution of Narcotic Drugs. These international entities and treaties reflected the scientific knowledge of their respective periods, and focused predominantly on opiate and coca derivatives, but established the principle of prohibition of the trade in narcotics, with the few exceptions being for internationally sanctioned medical or research purposes.

Maintaining a coherent international strategy for narcotics control was a priority following the Second World War and the establishment of the UN in 1945, and in 1946, the newly formed Economic and Social Council (ECOSOC) established the Commission on Narcotic Drugs (CND) through resolution 9 (1), to advise ECOSOC and the UN on drug policy. The Commission on Narcotic Drugs (CND) is a functional commission of the Economic and Social Council (ECOSOC). In the early years of CND, drug protocols were established, the most significant being the 1953 Protocol for Limiting and Regulating the Cultivation of the Poppy Plant, the Production of, International and Wholesale Trade in, and Use of Opium (Opium Protocol). The Opium Protocol reaffirmed that opium and related substances could only be used for scientific or medical purposes, and mandated for the establishment of dedicated drug agencies in Member States that ratified the protocol.

The modern CND is defined around three treaties: the Single Convention on Narcotic Drugs (1961), the Convention on Psychotropic Substances (1971), and the Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances (1988). The Single Convention was so named because it amalgamated and superseded all pre-existing drug control treaties. While earlier drug control treaties had largely been limited to controlling the supply of narcotics and limiting their usage to medical and research purposes, from the 1970s onwards demand reduction began to take a more prominent role in the language of international treaties. For example, the 1971 Convention on Psychotropic Substances requires signatories to take “all active measures to for the prevention of abuse of psychotropic substances.” The 1961 and 1971 Conventions, along with the Convention against Illicit Traffic in

1 UNODC, Information About Drugs, 2015.
2 Ibid.
3 Ibid.
4 Ibid.
5 UNECOSOC, Resolution on the Establishment of a Commission on Narcotic Drugs (E/RES/9(1)), 1946.
6 Ibid.
7 Ibid.
8 Ibid.
9 Ibid.
11 UN Opium Conference, Protocol and Final Act, 1953.
13 Ibid.
14 Ibid., p. 60.
Narcotic Drugs and Psychotropic Substances (1988), form the bedrock of the international drug control framework, of which CND is the central body.16

Governance, Structure and Membership

There are 53 members of CND, with 11 seats each reserved for African and Asian states, 10 for Latin America, six for Eastern Europe, and 14 for Western Europe and others.17 The remaining seat rotates between Asian and Latin American or Caribbean states every four years.18 Members must be party to the 1961 Single Convention on Narcotic Drugs, and “adequate representation” must be ensured for Member States that are either key producers of opium or coca leaves, key places where illicit narcotics are manufactured, or where the use of illicit narcotics is particularly concerning.19 The current Chair OF CND is Dominika Anna Krois of Poland, who has been serving since February 2020.20 All Members of CND are elected by an organizational session of ECOSOC.21 CND is led by the Bureau and Extended Bureau of the Commission.22 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 one.23 In addition, the Bureau works with the UN Secretariat to prepare CND sessions, as well as undertake organizational work between sessions.24 The Extended Bureau includes representatives from the five main global geographic regions, in addition to the EU, China, and the Group of 77 developing nations.25

CND, along with other bodies such as the Commission on Crime Prevention and Criminal Justice (CCPCJ) and the Commission on the Status of Women (CSW), is one of the functional commissions of ECOSOC.26 CND’s reports are considered at the substantive session of ECOSOC each year: several drafts are adopted and become ECOSOC resolutions, and other working resolutions ECOSOC refers to the General Assembly, to potentially become General Assembly resolutions.27 Several smaller bodies report directly to CND including the Sub-Commission on Illicit Drug Traffic and Related Matters in the Near and Middle East that was formed in 1973, which exists to facilitate cooperation between governments in the region, and to offer a focused regional perspective.28 There are also the four Regional Meetings of Heads of National Drug Law Enforcement Agencies.29 These bodies, one each for Europe, Latin America, Africa, and Asia, exist to improve high-level coordination between regional drug law enforcement agencies.30

Mandate, Functions and Powers

CND’s mandate is to “monitor the world drug situation, develop strategies on international drug control and recommends measures to combat the world drug problem, including through reducing demand for drugs, promoting alternative development initiatives, and adopting supply reduction measures.”31 The CND initial mandate, as set out in ECOSOC resolution 9(1) called for the new body to assist ECOSOC, supervise existing narcotics control treaties, and make recommendations on narcotic drug control

17 UNODC, CND: Membership.
18 Ibid.
19 Ibid.
20 UNODC, Executive Director.
21 UNODC, CND/CCPCJ: Fact Sheet on Membership.
22 UNODC, Bureau and Extended Bureau.
23 Ibid.
24 Ibid.
25 Ibid.
26 UNODC, The Economic and Social Council and the CND and CCPCJ: UN ECOSOC, Subsidiary Bodies of ECOSOC.
27 UNODC, The Economic and Social Council and the CND and CCPCJ.
29 Ibid., p. 145.
30 Ibid., p. 148.
31 UNODC, CND.
issues. This established CND as having a functional, operational aspect to its mandate, in addition to a normative policymaking mandate. This division of roles was only fully clarified and formalized in 1999 with the adoption of ECOSOC resolution 1999/30, which requires CND to structure its agenda into two distinct sections: a normative section, centered on policy issues and the upholding of treaties, and an operational section, where it exercises its role as the governing body of UNODC. UNODC itself was formed in 1997 by the merging of the secretariats of the UN International Drug Control Program and the Centre for International Crime Prevention, although the merged office was not renamed until 2002. As a governing body, CND is responsible for administrative and budgetary matters of the UNODC, as well as "strategic oversight." This means that while CND is not responsible for the day-to-day running of the UNODC, it is recognized as the central drug policy-making organ of the UN, makes suggestions as to the direction of UNODC policy, and offers guidance on strengthening its programs during sessions concerning the first part of its agenda.

Under the Single Convention on Narcotic Drugs (1961), CND is responsible for placing drugs into one of five schedules, depending on their harmfulness. Changes to drug scheduling can only be made on the recommendation of the World Health Organization (WHO). Drug scheduling changes can be overruled by the ECOSOC plenary session. The Single Convention established the International Narcotics Control Board (INCB) and charged it to "limit the cultivation, production, manufacture and use of drugs to an adequate amount required for medical and scientific purposes, to ensure their availability for such purposes and to prevent illicit cultivation, production and manufacture of, and illicit trafficking in and use of, drugs." As such, it is the INCB that works directly with governments to ensure compliance with the convention, not CND. The INCB focuses primarily on the regulation of legal drug markets, working with government agencies to ensure that controlled substance does not fall into the wrong hands. UNODC, meanwhile, focuses more on illicit drug markets, working with governments on demand reduction, police cooperation, and tackling organized crime. CND works closely with both bodies; as governing body of UNODC, CND approves the International Drug Control Program Fund, which accounts for 90% of UN for Drug Control Resources, and for the INCB, CND works in an advisory capacity.

CND’s mandate was further shaped in 2009 during the annual meeting's high-level segment, which is a meeting held at the ministerial or head of state level. At this meeting, 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 (the Plan) (2009). The Plan committed members to the

32 UN ECOSOC, Resolution on the Establishment of a Commission on Narcotic Drugs (E/RES/9(1)), 1946.
33 Ibid.
34 UN ECOSOC, 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.
36 UN CND, Annotated Provisional Agenda, 58th Session, 2014.
37 Ibid.
39 Ibid.
40 UNODC, Commentary on the Single Convention, 1961, p. 79.
41 Convention on Narcotic Drugs, 1961.
43 Ibid.
44 Ibid.
45 UN ECOSOC 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.
47 Ibid.
ambitious goal of eventually eliminating illicit drug consumption in its entirety. CND is named as the UN body that should play the main role in encouraging and assisting Member States in implementing the Plan, and is also tasked with developing new “indicators and instruments” by which to measure the extent of the global drug problem. The Plan itself is focused on both demand and supply reduction, the steps Member States should take to achieve this, and aims to eradicate both the demand and supply of illicit drugs by 2019.

Recent Sessions and Current Priorities

The 70th session of the UN General Assembly adopted the 2030 Agenda for Sustainable Development (2015), which included 17 goals to continue the progress achieved through the Millennium Development Goals (MDGs). SDG 3 (“ensure healthy lives and promote well-being for all at all ages”) includes in target 5 the aim of enhancing the prevention and treatment of substance abuse. With the aim of fulfilling this goal, in 2016, UNODC launched the “Listen First” Campaign, which promotes a better childhood as a basis to prevent drug abuse.

In 2016 the General Assembly held the UN General Assembly Special Session on the World Drug Problem (UNGASS). The goal of UNGASS was to define actions that should lead to the fulfilment of the Plan by 2019. In its outcome document, UNGASS made recommendations on demand reduction, prevention, treatment, availability, access to controlled substances for medical and scientific purposes, supply reduction, law enforcement in drug-related crime, and cross-cutting issues such as the role of women and youth. During the intersessional meeting of CND in September 2017, strategies to combat drug abuse were evaluated and reconsidered with regard to the goals set by UNGASS. Besides new forms of medical treatments, Member States also reported success in awareness campaigns through social media channels. During the UN General Assembly 75th session in addressing the World Drug Problem, the General Assembly further reiterated through its resolution 75/198 (2020) that UNGASS objectives and goals should go beyond the 2019 deadline. Additionally, Member States reiterated their commitment to enhance cooperation on regional, interregional, and international cooperation by promoting alternative development, technical, and financial cooperation. CND’s 2019 Ministerial meeting of the 62nd session established the importance of stakeholders such as “law enforcement, judicial and health-care personnel, civil society, the scientific community and academia, as well as the private sector.” The ministerial meeting also called upon the Executive Director of the UNODC to create a single report on a biennial basis that would be provided by Member States. This report is meant to annually review progress made to implement all commitments at the national, regional and international

49 Ibid., p. 8.
52 Ibid.
53 UNODC, World Drug Day.
55 Ibid.
56 UN General Assembly, Special Session on the World Drug Problem, Our joint commitment to effectively addressing and countering the world drug problem (A/RES/S-30/1), 2016.
57 UN CND Blog, CND Intersessional, 26 September 2017: Chapter 1 on demand reduction, 2017.
58 Ibid.
59 UN General Assembly, International cooperation to address and counter the world drug problem (A/RES/75/198), 2020.
60 Ibid.
61 UN CND, Ministerial declaration on strengthening our actions at the national, regional and international levels to accelerate the implementation of our joint commitments to address and counter the world drug problem, 2019.
62 Ibid.
levels with the first report due at the CND’s Sixty-fifth session in 2022. The UNODC released its annual 2020 Competent National Authorities under the International Drug Control Treaties which establishes a directory list of Member States “certificates and authorization for the import and export of narcotic drugs and psychotropic substances,”, this annual list provides changes in Member States contact details of national competent authorities or international bodies.

In March 2020, the CND 4th session of the year approved Decision 63/14 which established changes in the scope of control of substances that was proposed by scheduling recommendations in the World Health Organization on cannabis and cannabis-related substances. The 2021 World Drug Report (2021) emphasized trends such as the legalization of cannabis in North America and opioid use at the global and regional levels. Additionally, the global COVID-19 pandemic began to spread across the world leading to the CND to adopt resolutions that address a drug control strategy and policy to support Member States. UN Secretary-General António Guteres urged the CND during its 64th session to “continue building on shared commitments to advance evidence-based and balanced responses to drugs, including to support billions of people in low and middle class countries, who have limited or no access to essential medicines” in response to COVID-19. The most recent CND session, focused on alternative development drug control strategies to address COVID-19, facilitating scientific efforts in drug demand reduction services, and improving data collection to harmful effects of narcotic drugs.

Conclusion

The international framework for controlling illicit substances is built primarily on the 1961, 1971, and 1988 Conventions, and CND is the central body tasked with upholding these treaties. Its dual role as both a normative policymaking body and as a functional committee, acting as a governing body of UNODC with control of over 90% of the UN’s anti-drugs budget, makes it a committee of critical importance. As the 2019 review and UNGASS have shown, the 2009 Plan of Action was far from perfect as it failed from a lack of resources and commitment. In preparation for the 63rd session, the Commission continues to address the short comings of the Plan, as well as new challenges by focusing more on addressing the issues from different perspectives, such as health care. The challenges brought with COVID-19 has also presented new issues and concerns with sharing life-saving drugs during a pandemic and addressing an even larger crisis with the World Drug Problem. In preparation for the conference, delegates should bear in mind that this complex challenge will require a holistic approach that includes all aspects of the challenge posed by the world drug problem.

Annotated Bibliography


63 UN CND, Ministerial declaration on strengthening our actions at the national, regional and international levels to accelerate the implementation of our joint commitments to address and counter the world drug problem, 2019.
64 UNODC, Competent National Authorities under the International Drug Control Treaties, 2021.
65 UNODC, Decision 63/14, 2020.
68 UN Secretary-General, Message to the 64th Session of the CND, 2021.
69 UN CND, Report on the 64th Session (E/CN.7/2021/10), 2021.
71 UNODC, CND.
72 UN CND, Ministerial declaration on strengthening our actions at the national, regional and international levels to accelerate the implementation of our joint commitments to address and counter the world drug problem, 2019.
73 Ibid.
74 UN CND, Report on the 64th Session (E/CN.7/2021/10), 2021.
Adopted as a result of the most recent session of the CND, the Report of the 63rd session of CND provides insight on CND workings and recent policy decisions have been made. Additionally, the Report provides all resolutions that have been adopted by the CND. The CND session reports are submitted to ESOSOC for approval and a list of decisions for the body to be submitted. The 63rd Session agenda included amending several drugs and narcotics in classification of schedule while also further encouraging collaboration and addressing the world drug problem. This document will provide delegates with immense information while discussing policy actions and interworking of the CND as well.


This document presents insights on the current progress of CND efforts addressing the World Drug Problem. Delegates will find progress, actions, and further targets that the CND wishes the international community to address during the COVID-19 pandemic. Additionally, the CND provides various approaches in addressing the new crisis of the pandemic. Delegates should look to this document to form drug policies and its relationship with the World Drug Problem.


The UNODC Strategy for 2021-2025 provides the current UN framework on drug policy and is one of the most frequently referenced documents for addressing the World Drug Problem. The Strategy contains indicators and targets for current drugs and is useful in measuring progress for the international community. It will be important for delegates to understand the various priority areas of the Strategy as well as its targets to assess current progress on the COVID-19 pandemic on global, national, and local drug enforcement efforts.


The Single Convention on Narcotic Drugs is an international treaty to limit the production and distribution of a number of narcotics, with limited exceptions made for medical treatment and research. It consolidated several earlier treaties, and expanded their scope to include other substances, for example cannabis and related substances. In tandem with the later Convention on Psychotropic Substances (1971), which included synthetic psychoactive substances such as LSD, which were not widely understood in 1961, these two treaties form the bedrock of international narcotics control. In the treaty, CND, alongside the WHO, was tasked to “schedule” narcotics in one of four different categories.


This resolution from 1946, one of the first adopted by the newly formed UN, established CND to advise and make recommendations to ECOSOC on drug control, and to ‘continually review’ narcotics control policies. The mandate makes clear CND is taking over all responsibilities of the defunct League of Nations Advisory Committee on the Traffic in Opium and Other Dangerous Drugs. It is useful to understand the initial mandate of CND to fully appreciate how it has developed.
Bibliography


1. The Emerging Challenges of Synthetic Drug Trafficking

**Introduction**

Synthetic drugs are defined as “any substance of synthetic origin with psychoactive effects available on the illicit drug market and/or used for non-medical purposes.”\(^75\) Within that category, Amphetamine-type stimulants (ATS) are a group of synthetic stimulants including amphetamine, methamphetamine, and ecstasy.\(^76\) The number of drug seizures are one of the most important indicators of the state of the synthetic drug market.\(^77\) Currently, the market for ATS is emerging with a significant increase in methamphetamine seizures from 100 tons in 2013 to 228 tons in 2018.\(^78\) The United Nations Office on Drugs and Crime (UNODC) notes that close to 24,000 clandestine laboratories used to manufacture synthetic drugs were detected globally during the period of 2015 to 2019.\(^79\) New psychoactive substances (NPS) are drugs that pose a threat to public health since they are not scheduled by the United Nations (UN) conventions on drugs, but have the same negative effects of ATS from their consumption.\(^80\) Also, NPS are harder to identify for authorities, do not have geographical or environmental limitations for their production, and have a global market that is increasingly important.\(^81\) In recent years, more than 1,000 NPS have been identified within 125 countries.\(^82\)

As the Commission on Narcotic Drugs (CND) is the main policymaking organ of the UN regarding drugs and drug trafficking, the emergence of synthetic drugs will ultimately affect the work of CND and the way it offers advice on policymaking.\(^83\) Through its mandate of ensuring the implementation of treaties and directing the programs under UNODC, CND can address emerging issues such as transnational trafficking and the availability of legal chemicals used to produce illegal synthetic drugs.\(^84\) These legal chemicals are called precursor chemicals and drug traffickers can find them through licit channels.\(^85\) Although the issues regarding narcotic drugs, substance abuse, and drug trafficking have been addressed by CND, the specific issue of synthetic drugs has its own challenges, including difficulties detecting illegal activity due to the use of legal precursor chemicals in the manufacturing process, health risks with synthetic drug abuse, and the widespread use of cryptocurrency and the dark web.\(^86\)

**International and Regional Framework**

The *Single Convention on Narcotic Drugs* (1961) is the first international convention to propose drug policy and its objective is to deter substance abuse and limit drug trafficking through the criminalization of drugs.\(^87\) It resulted in the creation of the International Narcotics Control Board (INCB), an independent body that consists of 13 members elected by the Economic and Social Council (ECOSOC) and the World Health Organization (WHO).\(^88\) The scheduling of drugs is a procedure established through the 1961 Convention and is the centerpiece of the normative mandate of CND.\(^89\) To schedule a drug, WHO or a Member State must submit a notification to CND through the Secretary-General.\(^90\) After evaluating a

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76 Ibid., p. 39.
77 Ibid., p. 6.
78 Ibid., p. 6.
83 UN ECOSOC, *Resolution on the Establishment of a Commission on Narcotic Drugs (E/RES/9(1))*, 1946.
84 UN CND, Report on the Sixty-Third Session, 2020, p. 5
substance, members of CND vote by simple majority.\textsuperscript{91} Once the scheduling takes effect, ECOSOC may review the decision.\textsuperscript{92} However, since only drugs that have opium-, cocaine- and cannabis-like effects are regulated by the \textit{Single Convention on Narcotic Drugs} (1961), the necessary provisions to address synthetic drugs were lacking.\textsuperscript{93} After NPS and ATS appeared on the market, the \textit{Convention on Psychotropic Substances} (1971) was adopted to extend the purview of the international normative system that was previously limited to drugs such as cocaine, cannabis, and opium.\textsuperscript{94} In 1988, the \textit{Convention Against Illicit Traffic in Narcotic Drugs and Psychotropic Substances} was adopted to provide additional measures for scheduling drugs and combatting drug trafficking.\textsuperscript{95} To schedule a substance under the 1988 Convention, INCB may initiate a request instead of WHO.\textsuperscript{96} Regarding synthetic drugs, this convention was also adopted in response to the prevalence of precursor and pre-precursor chemicals.\textsuperscript{97}

In 2009, at ECOSOC’s High-Level Segment, the \textit{Political Declaration and Plan of Action on International Cooperation Towards an Integrated and Balanced Strategy to Counter the World Drug Problem} (the Plan) was adopted.\textsuperscript{98} The Plan identifies emerging challenges such as the use of precursor chemicals in the production of synthetic drugs, and the diversion of legal pharmaceutical products towards illicit drug trafficking.\textsuperscript{99} It also proposes further surveillance of synthetic drug trafficking due to a lack of monitoring.\textsuperscript{100} Following the 2009 Plan, the Joint Ministerial Statement of the 2014 High-Level Review served as a midterm review of the implementation of the Plan.\textsuperscript{101} Because of new trends in synthetic drugs trafficking, Member States agree they should ensure shared-responsibility with all stakeholders and increase scientific-based decisions to implement their commitment to the Plan.\textsuperscript{102} Then, in 2016, the General Assembly convened for the United Nations General Assembly Special Session on the World Drug Problem (UNGASS 2016).\textsuperscript{103} Regarding synthetic drugs, the outcome document of UNGASS 2016, \textit{Our Joint Commitment to Effectively Addressing and Countering the World Drug Problem}, made several recommendations, namely, to include border enforcement agencies when sharing intelligence and the implementation of the Sustainable Development Goals (SDGs) established in 2015 by General Assembly resolution 70/1, \textit{Transforming our World: The 2030 Agenda for Sustainable Development}.\textsuperscript{104} SDG 1 (“end poverty and all its forms everywhere”) as well as SDG 3 (“good health and well-being”) are linked to the issue of synthetic drug trafficking.\textsuperscript{105} Providing economic alternatives to drug trafficking will limit illicit activities and promoting health-related solutions will limit public health consequences.\textsuperscript{106}

Finally, the 2019 \textit{Ministerial Declaration on Strengthening our Actions at the National, Regional and International Levels to Accelerate the Implementation of our Joint Commitments to Address and Counter the World Drug Problem} was the result of a high-level segment to assess the results of the ten year

\begin{thebibliography}{99}
\bibitem{91} UNODC, \textit{Scheduling Procedures Under the International Drug Control Conventions}, 2020, p. 2.
\bibitem{92} Ibid., p. 5.
\bibitem{93} Ibid., p. 5.
\bibitem{94} Ibid., p. 1.
\bibitem{97} Ibid., p. iii.
\bibitem{100} Ibid., pp. 34-37.
\bibitem{102} UN CND, \textit{Joint Ministerial Statement 2014 High-Level Review by the Commission on Narcotic Drugs of the Implementation by Member States of the Political Declaration and Plan of Action on International Cooperation Towards an Integrated and Balanced Strategy to Counter the World Drug Problem}, 2014, p. 3.
\bibitem{103} UN General Assembly, \textit{Our Joint Commitment to Effectively Addressing and Countering the World Drug Problem}, 2016, p. 1.
\bibitem{104} Ibid., p. 13.
\bibitem{105} UN General Assembly, \textit{Transforming our World: the 2030 Agenda for Sustainable Development}, 2015.
\bibitem{106} UN General Assembly, \textit{Our Joint Commitment to Effectively Addressing and Countering the World Drug Problem}, 2016, p. 23.
\end{thebibliography}
completion of the Plan. Member States commit to the principle of shared responsibility, prioritize evidence-based solutions through knowledge sharing, and work to end the diversion of precursor substances to ensure they remain available for pharmaceutical research and medical purposes. More specifically, Member States are encouraged to expand monitoring capacities through inter-agency collaboration and integrating qualitative studies on new substances, market studies on global trends and forensic data with law-enforcement investigations. When addressing the problems of synthetic drug consumption, the Ministerial Declaration on Strengthening our Actions at the National, Regional, and International Levels to Accelerate the Implementation of our Joint Commitments to Address and Counter the World Drug Problem (2019) suggests that Member States should focus not only on demand reduction for high risk users, but also consider treatment, rehabilitation, and social reintegration for drug users. Such evidence-based systems can be accomplished through the collaboration of educational, judicial, and healthcare agencies.

Role of the International System

The scheduling process is a key mechanism in the international system for control of synthetic drugs and substances and is evolving continually following a comprehensive process with the collaboration of experts from WHO and INCB, followed by a review by ECOSOC, if needed. At its sixty-third session, the Commission considered 14 new substances to be scheduled, most of which were scheduled under the 1971 Convention. The process was initiated by the submission of these proposals by WHO and INCB as provided in the Conventions of 1961, 1971, and 1988. During this session, it was highlighted that the scheduling of substances with the collaboration of INCB, UNODC, WHO, and CND has greatly facilitated Member States’ control of synthetic drugs nationally and international cooperation.

Following the adoption in 2012 of CND resolution 55/1 on Promoting International Cooperation in Responding to the Challenges Posed by new Psychoactive Substances, which asked for an update on the Global Synthetics Monitoring: Analysis, Reporting and Trends Programme (SMART), the UNODC produced a new report in 2013. The aim of the Global SMART Programme is to enhance the monitoring capacities of Member States through scientific information and knowledge sharing of synthetic drugs, as outlined in the Plan. In 2013, after CND resolution 56/4 on Enhancing International Cooperation in the Identification and Reporting of new Psychoactive Substances recognized the importance of global data and information sharing regarding the synthetic drug trafficking of NPS, the Early Warning Advisory (EWA) was established by the UNODC and managed by the Global SMART Programme. Early Warning Systems (EWS) collect data through and online platform that allows policymakers to track market trends and health impacts in order to adapt to emerging precursors and NPS that require an immediate response. The main objective of conducting drug analysis is to find NPS and identify which chemicals pose a threat to public health and security to prioritize legislative

107 UN CND, Ministerial Declaration on Strengthening our Actions at the National, Regional, and International Levels to Accelerate the Implementation of our Joint Commitments to Address and Counter the World Drug Problem, 2019, p. 1.
108 Ibid., p. 3.
109 Ibid., p. 34.
110 UN CND, Ministerial Declaration on Strengthening our Actions at the National, Regional and International Levels to Accelerate the Implementation of our Joint Commitments to Address and Counter the World Drug Problem, 2019, p. 37.
111 Ibid., p. 19.
112 UNODC, Scheduling Procedures Under the International Drug Control Conventions, 2020, p. 4.
114 Ibid., p. 33.
115 Ibid., p. 39.
117 Ibid., p. i.
work. Following the call for an innovative approach to tackle the global emergence of synthetic drugs in CND resolution 61/8 on *Enhancing and Strengthening International and Regional Cooperation and Domestic Efforts to Address the International Threats Posed by the non-Medical use of Synthetic Opioids*, UNODC created the UN Toolkit on Synthetic Drugs. It is a multidisciplinary platform that provides resources and guidelines for various fields that work with synthetic drugs such as law enforcement, health, and research. This initiative was then commended by CND resolution 63/1 on *Promoting Efforts by Member States to Address and Counter the World Drug Problem, in Particular Supply Reduction-Related Measures, Through Effective Partnerships With Private Sector Entities*, which called for Member States to operationalize the guidelines and information found in the toolkit in national policies and strategies.

Lastly, the International Criminal Police Organization (INTERPOL) has partnered with many international agencies by participating or coordinating 7 regional initiatives that target synthetic drug trafficking. These partnerships include many agencies such as UNODC, the World Customs Organization (WCO), Europol, and INCB. Project ION (International Operations on NPS) is another example of such collaboration and is coordinated by INCB. As a contributing member to Project ION, INTERPOL is facilitating the sharing of intelligence between national agencies to track NPS trafficking. This initiative also established IONICS, a digital platform that allows intelligence sharing and real time communication concerning NPS trafficking and production. UNODC also joined forces with WCO while establishing the Container Control Programme (CCP), a that facilitates cross-border trade while limiting drug trafficking by coordinating regional meetings and intelligence sharing. Furthermore, non-governmental organizations (NGO) involvement with CND, INCB, and UNODC has been made possible through the Vienna NGO Committee on Drugs (VNGOC), a committee that represents 27 NGOs to high-level discussions such as UNGASS 2016.

The Global Synthetic Drugs Market and Supply Chain

The latest *Global Synthetic Drugs Assessment* published in 2020 by UNODC, analyzes the global synthetic drugs market and studies regional-specific drug markets. During the manufacturing process of synthetic drugs, precursor chemicals are widely used. For example, 14 out of the 22 precursor chemicals scheduled under the 1988 Convention are legal for pharmaceutical purposes, but are also used to illegally produce ATS. According to the Global Synthetic Drugs Assessment of 2020 substances can be limited by aligning drug policies and similar enforcement capabilities between neighboring countries. The diversion of precursor substances, as well as legal ATS or pharmaceutical drugs, occurs when they are initially found in legal channels and markets, but then are diverted to the illegal market to synthesize illegal drugs or for the distribution of pharmaceutical drugs. Synthetic

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121 UNODC, *UN Toolkit on Synthetic Drugs*, 2020.
122 Ibid., p. 3.
123 Ibid., p. 5.
125 Ibid., p. 4.
128 Ibid., p. 6.
132 Ibid., p. 12.
133 Ibid., p. 12.
134 Ibid., p. 12.
opioids that are trafficked across borders are mainly from illicit manufacturing, while diverted substances are more likely to be sold within national borders. The manufacturing of ATS takes place in clandestine laboratories and over the period of 2010-2019, the number of dismantled methamphetamine laboratories has significantly decreased, going from 10,600 in 2010, to 1,600 in 2019. This decline is explained by a shift of production from small laboratories in North America and Asia towards high yield manufacturing in Africa, Europe, and Oceania. In their latest publication, the SMART initiative acknowledges that the monitoring and scheduling of precursor chemicals disrupts the production of ATS for a short period of time, but does not have lasting effects when studying global trends. When regulating a substance, illicit manufacturers of synthetic drugs can overcome a disruption by using an alternative non-scheduled chemical or pre-precursor substance that are not scheduled. In response to this issue and the rapid development of pre-precursor substances, the SMART initiative suggests voluntary public-private partnerships can help law enforcement identify these chemicals with the valuable information private actors in the legal production, trade and financing can provide.

Partnerships with the private sector can help law enforcement in the context of digital markets, since they are held on privately owned platforms and the delivery of illegal synthetic drugs is carried out by private delivery services and shipping companies. According to the World Drug Report (2021), ATS and NPS both are widely available in online markets, which is rapidly becoming the platform of choice both for supply and demand. Governments working with private actors such as internet providers are able to foster self-regulation and collaboration to detect illegal online markets. The financial flow of the synthetic drug market and payments are made on virtual platforms, using cryptocurrencies and the dark web. Often, these payments are made across borders, which stresses the need for joint investigations and align drug enforcement policies among Member States to prosecute illegal activities adequately. In 2019, the second INTERPOL Global Conference on Illicit Drugs underlined how cybercrime is intimately linked to the synthetic drug trade. INTERPOL’s Contribution to the United Nations General Assembly Special Session (UNGASS) on the World Drug Problem (2015) highlights in its recommendations the need to clarify what actions law enforcement can take when conducting online investigations on transnational criminal activity.

The Impact of COVID-19 on the Synthetic Drugs Market

UNODC found that limits on legal trade and COVID-19 measures have significantly reduced the trafficking of precursor substances for manufacturing synthetic drugs, especially when importing from another region. However, unlike precursor substances, the overall market of synthetic drugs and the availability of ATS and NPS was not affected at the same level. Since most precursor chemicals are transported through licit channels and trade routes, limits on trade had an effect on the transportation of these substances as well. Despite these limits, the manufacturing was only briefly interrupted; most

137 Ibid., p. 52.
138 Ibid., p. 53.
140 Ibid., p. 12.
141 Ibid., p. 10.
143 Ibid., p. 66.
145 Ibid., p. 75.
146 Ibid., p. 24.
149 UNODC, COVID-19 and the Drug Supply Chain: From Production and Trafficking to use, 2020, p. 3.
150 Ibid., p. 13.
clandestine laboratories found local sources of precursor chemicals.\textsuperscript{152} Others like the South East Asian illicit drug market was uninterrupted by the pandemic due to the presence of an important chemical industry.\textsuperscript{153} On the other hand, despite the COVID-19 crisis, the supply of synthetic drugs increased from 2019, mainly because these substances are distributed close to where they were manufactured, usually within the same region.\textsuperscript{154} For example, transnational criminal organizations in North America were not affected by measures to counter the spread of COVID-19 and continued to transport synthetic drugs through trafficking corridors and started to produce their own precursor chemicals.\textsuperscript{155}

Another major concern raised by the UNODC Global Research Network is the diversion of sometimes limited law-enforcement resources from counter-narcotics towards enforcing lockdowns and other COVID-19 measures.\textsuperscript{156} Healthcare and other services for people with drug use disorders, which are often considered as non-essential health services, can experience government budget cuts and staff shortages.\textsuperscript{157} At the 64\textsuperscript{th} session of CND, Member States recognized that COVID-19 has limited health systems’ capacities to limit health consequences of drug abuse and to provide treatment and rehabilitation to drug users.\textsuperscript{158} Encouraged solutions proposed to counter the repercussion of the pandemic include expanding healthcare systems that can be resilient to health crises, and collecting data on how the world drug problem is affected by COVID-19.\textsuperscript{159}

The COVID-19 crisis has caused an economic decline that worsened the financial situation for socioeconomically disadvantaged people, for whom substance abuse is prevalent.\textsuperscript{160} The economic impact of the pandemic has led to an increase in drug use and production, especially among poorer communities.\textsuperscript{161} Predictions made based on the global economic crisis in 2008 expect a decrease in law enforcement’s budget to counter drug trafficking and an increase in the use of cheaper drugs, both which prove challenging to public health.\textsuperscript{162} While the demand for synthetic drugs used in a social setting recreationally dropped by 20 percent because of social distancing, the manufacturing, trafficking, and use of illicit synthetic drugs have all increased despite the COVID-19 pandemic.\textsuperscript{163}

**Conclusion**

Collaboration between UN entities, national law enforcement agencies, and the private sector have proven to be a useful tool to share information on drug trafficking operations.\textsuperscript{164} The growing synthetic drug market means Member States face rapidly evolving challenges that require expertise in many fields including international law, public health, law enforcement, and scientific research.\textsuperscript{165} During the past decade, the focus was on supply reduction, demand reduction, and international cooperation for both scientific knowledge and intelligence sharing.\textsuperscript{166} In the 2019 *Ministerial Declaration on Strengthening Our Actions at the National, Regional and International Levels to Accelerate the Implementation of Our Joint*

\textsuperscript{153} Ibid., p. 21.
\textsuperscript{154} Ibid., p. 36.
\textsuperscript{155} Ibid., p. 34.
\textsuperscript{159} Ibid., p. 5.
\textsuperscript{161} Ibid., p. 6.
\textsuperscript{162} Ibid., p. 14.
\textsuperscript{163} UNODC, *Global Synthetic Drugs Assessment*, 2020, p. 4.
\textsuperscript{165} UN CND, *Report on the Sixty-Third Session*, 2020, p. 3.
\textsuperscript{166} UN CND, *Ministerial Declaration on Strengthening our Actions at the National, Regional and International Levels to Accelerate the Implementation of our Joint Commitments to Address and Counter the World Drug Problem*, 2019, p. 2.
Commitments to Address and Counter the World Drug Problem, Member States suggest that future actions should include the protection of health, offering treatment for drug users, and safety to vulnerable communities. At their latest session, CND addressed the impact of COVID-19 on the implementation of past commitments and encouraged continued efforts to counter the world drug problem despite the current pandemic by adopting a joint Statement on the Impact of the Coronavirus Disease (COVID-19) Pandemic on the Implementation of the Joint Commitments of Member States to Address and Counter all Aspects of the World Drug Problem.

Further Research

While preparing for this topic, delegates should keep in mind the following questions: What are additional challenges posed by synthetic drug trafficking that are not addressed by existing initiatives and programs and how can they be tailored to the current context? What legal frameworks can help enforcing transnational crime and solve jurisdiction challenges? What measures can the international system put in place to encourage states to increase human and financial resources for drug trafficking enforcement despite shortages caused by the COVID-19 crisis? How can inclusive treatment and overdose prevention help curb the negative effects of synthetic substance abuse? What could be implemented to materialize a comprehensive initiative to combat the online aspect of drug trafficking, based on the principle of shared responsibility, while respecting state sovereignty?

Annotated Bibliography


This annual report for INCB provides delegates with insight to the mandate and functions of the organization. Although INCB is an independent organization, it was established by the Single Convention on Narcotic Drugs of 1961. Delegates will find many pertinent definitions of technical terms that will allow them to, for example, better understand the difference between psychotropic substances and narcotic drugs. In the second part of this annual report, delegates will find a detailed global analysis of deficiencies in regulation of synthetic drugs. Many recommendations on how to tackle this topic from a public health perspective are also included.


This report of the United Nations Office on Drugs and Crime was written by the Global SMART Programme and consists of technical details regarding specific substances. The first part of the report may be useful in reviewing how precursor substances, synthetic drugs, and legal drugs are treated under the current international system. This report also includes country-specific as well as existing regional and national legal frameworks that regulate or control these substances. Delegates will find many examples of regional collaboration to track the spread of NPS and other synthetic drugs using information sharing initiatives and Early Warning Systems.


167 UN CND, Ministerial Declaration on Strengthening our Actions at the National, Regional and International Levels to Accelerate the Implementation of our Joint Commitments to Address and Counter the World Drug Problem, 2019, p. 2.

168 Ibid., p. 2.
This document is a comprehensive overview of the effects of COVID-19 on the world drug trade because it considers drug production, trafficking, and consumption. Also, this research brief gives delegates an understanding of how both the pandemic itself and the measures implemented to limit the spread of COVID-19 can change how drugs are produced and transported, how consumers change their drug habits, and how governments must adapt their response to tackle synthetic drug trafficking. Cross-border transportation of these substances have been affected by COVID-19 measures, but as described, the adaptability of drug trafficking groups, especially for synthetic drugs, poses additional complications.


This document was prepared by UNODC’s secretariat to present an overview of CND’s scheduling mandate and functions. The collaborative work of international organizations and UN agencies in the process of scheduling substances under the treaty system for narcotic drugs is explained in detail. More specifically, this document details the important role of WHO and INCB while collaborating with both CND and UNODC. The scheduling process and how it differs for different drugs and precursor substances is also described. Delegates can refer to this document to further their understanding of the conventions, their implications, and their application in the work of the CND. Finally, delegates may consult what drugs and substances are included in the scheduling groups for each convention.


UNODC produced this report to communicate information about drugs to help facilitate the formation of fact-driven policies worldwide. It presents delegates with updated information and statistics regarding drug use, production and trafficking in specific countries. More specifically, Booklet 1 includes a presentation of past policies and recommendations for future policies. Furthermore, Booklet 4 describes the global consumption and production of synthetic drugs, with extensive regional and country-specific statistics. Booklet 5 presents delegates with the impact of COVID-19 on drug markets and evaluates both how COVID-19 related measures affect supply and demand, as well as the impact of the crisis itself. The World Drug Report can provide delegates with some of the most up-to-date information and statistics available.

Bibliography


2. Incorporating a Human Rights Focus into International Drug Policies

“Individuals who use drugs do not forfeit their human rights.”

Introduction

In the 2021 World Drug Report (2021), the United Nations Office on Drugs and Crime (UNODC) found that in 2010-2019, the number of individuals using drugs worldwide increased by 22%.

As a result of the increase in drug users, 494,000 deaths and 30.9 million years of “healthy” lives were lost in 2019. The World Drug Problem continues to be an issue for the Commission on Narcotic Drugs (CND) and its institutional and Non-Governmental Organization (NGO) counterparts. The 2021 World Drug Report, published by the UNODC, predicted that by 2030, the number of drug users will rise by 11% globally. This is largely due to the ongoing coronavirus disease (COVID-19) pandemic. With over 100 million individuals in global poverty and 250 million leaving their jobs, the COVID-19 pandemic has created stress on socioeconomic factors that have led individuals to take drugs for the first time.

Every United Nations (UN) Member State has ratified at least one of the nine core treaties in regards to human rights and every Member State is encouraged to follow human rights obligations under international law as listed in the Universal Declaration of Human Rights (1948). Similarly, the 2016 UNODC World Drug Report calls for international drug policy to be in-line with human rights. Both UN institutions and regional bodies, such as the African Union and the Association of Southeast Asian Nations, have made an active effort to incorporate a human rights approach to international drug policy.

In its “Special Points of Interest” of the 2021 World Drug Report, UNODC suggests an “integrated, people-centered and human-rights based approach” to drug use in Africa. Despite the International Narcotics Control Board (INCB) changing its original position by opposing incarceration and the death penalty, there are still currently over 10 million prisoners worldwide that have committed drug-related offenses. CND remains dedicated to implementing new international drug policy through facilitating multi-stakeholder forums and working closely with other UN institutions and NGOs to reach consensus on the criminalization of drug offenses and providing women with equal access to the same social and healthcare opportunities available to men.

International and Regional Framework

The foundational human rights documents, the Universal Declaration of Human Rights (1948), focuses on the United Nation’s commitment to tackling human rights abuses. The declaration serves as the main source behind CND’s priority of applying human rights into international drug policy. CND is committed to ensuring that the right to life, and the right to equal treatment in the eyes of the law, are upheld when implementing international drug policy. However, the three core conventions on drug policy do not

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171 Ibid., p. 22.
175 Ibid.
181 CND, Themetic Discussions.
183 Ibid.
184 UNODC, CND, 2021.
actively defend human rights. These conventions are: the Single Convention on Narcotic Drugs (1961), the Convention on Psychotropic Substances (1971), and the United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances (1988). The first two conventions state that they are “concerned with the health and welfare of mankind,” whereas the 1988 convention has a “view to reducing human suffering.” The main goal of the conventions was drug control, with the 1961 and 1971 conventions outlining restrictions on a number of drugs commonly used. Lastly, the 1988 convention tackled the trafficking aspect of drug control, however none of the three.

The Political Declaration On Countering the World Drug Problem (1998) requested that Member States report their progress to CND biennially. The creation of consistent reporting to CND established an environment where policies are based off the progress of Member States in achieving the goals set out by treaties regarding the World Drug Problem. This allows CND to monitor how successful its attempts at implementing human rights in international drug policy have been. CND established the Political Declaration and Plan of Action on International Cooperation Towards an Integrated and Balanced Strategy to Counter the World Drug Problem (2009), which was adopted by General Assembly resolution 64/182 on 18 December 2009, titled International Cooperation Against the World Drug Problem. The political declaration recognized gender inequalities regarding access to drug treatment when addressing human rights. General Assembly Resolution 69/201, adopted on 18 December 2014, titled International Cooperation Against the World Drug Problem, reaffirmed that the world drug problem is to be countered with full respect to human rights. This resolution promoted both the right to health and the right to be treated equally. In doing so, it recognized that more needs to be done to mitigate the social stigma of using drugs and reducing barriers to access healthcare.

**Role of the International System**

CND and UNODC are cooperating in their efforts to assist Member States in adhering to international drug policy and upholding their human rights obligations. UNODC aids CND with the implementation of international drug policy through field support, research, and analysis. In its UNODC Strategy 2021-2025, UNODC recognizes human rights to be present in two of its five thematic areas: the world drug problem and crime prevention and criminal justice. As one of UNODC’s two governing bodies, CND

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185 UN, Conferences: Drugs Control, 2021.
188 UN, Conferences: Drugs Control, 2021.
189 UN Conference for the Adoption of a Convention Against Illicit Traffic in Narcotic Drugs and Psychotropic Substances, The United Nations Convention Against Illicit Traffic on Narcotic Drugs and Psychotropic Substances, 1988.
191 Ibid.
192 Ibid.
196 Ibid.
198 UNODC, CND, 2021.
meets annually to consider, adopt resolutions, and oversee international drug policies. The 2019 Ministerial Declaration agreed on a new multi-year work plan where interactive meetings will be held annually until 2024. The thematic areas which will be addressed annually are derived from the 2019 Ministerial Declaration and include drug treatment and health services in 2020, and the consequences of drug trafficking in 2021. The first session of the 2020 intersessional meeting recognized the right to health and how it has been hindered by increase of drug users in economically poor regions. The Ministerial Declaration sought to review the progress made by Member States in implementing the policy commitments in 2029, with a mid-term review in 2024.

The global effort to alleviate human rights violations has been led by UN committees such as the Human Rights Council (HRC), CND, UNDOC, and the United Nations Development Programme (UNDP). INCB publishes annual reports for CND and analyzes trends in the World Drug Problem. The reports not only monitor the compliance of Member States in following current international drug policy, but they also analyze the action taken by INCB itself to ensure that Member States follow international drug policies. This information aids CND in formulating how to incorporate human rights into future resolutions tackling the World Drug Problem. For instance, the recommendations made in the 2020 Report of the INCB, on the right to health, were recognized in UNODC’s Strategy for 2021-2025 (2020).

UN institutions collaborate with NGOs such as the International Drug Policy Consortium (IDCP) and the 192 NGOs within its global network. A key example of such collaboration is the International Guidelines on Human Rights and Drug Policy, published in 199 and again in 200. The guidelines produced by the IDCP, UNDP, and the International Center on Human Rights on Drug Policy (HRDP), identify the human rights principles and obligations that should be reflected in international drug policies enacted by CND and other UN institutions. Most recently, the 2020 guidelines have played a key role in promoting the right to non-discrimination through dedicating an entire section of the publication on the human rights obligations on certain groups. The guideline called for mitigation of the social marginalization of women, and was addressed by CND resolution 64/5, titled Facilitating Access to Comprehensive, Scientific, Evidence-Based Drug Demand Reduction Services and Related Measures, Including for People Impacted by Social Marginalization. Civil Society Organizations (CSOs) also work with UNODC Civil Society Team (CST) in order to attack the World Drug Problem through implementing human rights into international drug policy.

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201 UNODC, CND: Mandate and Functions, 2021.
205 UNODC, CND, 2021.
207 INCB, Mandate and Functions.
209 Ibid.
211 IDPC, About, 2021.
213 Ibid.
214 Ibid.
216 UNODC, UNODC Engagement with Civil Society on Drugs and Crime, 2021.
A Gender Perspective in Addressing the World Drug Problem

A prevalent barrier to gender equality within international drug policy is treatment for substance abuse. INCB identified that although women make up 33% of drug users globally, they represent only 20% of those in treatment. In Member States with a low gross domestic product per capita, the disparity is amplified. This disparity was recognized by CND in its 2021 resolution 64/5, titled, Facilitating Access to Comprehensive, Scientific Evidence-Based Drug Demand Reduction Services and Related Measures, Including for People Impacted by Social Marginalization. In this resolution, CND invited Member States and donors to provide financial help to developing Member States to tackle the disparity. Social stigma and legal sanctions, such as loss of child custody, often prevent women from seeking substance abuse treatment. The 2018 CND resolution 61/11 Promoting Non-Stigmatizing Attitudes to ensure the Availability of, Access to and Delivery of Health, Care and Social Services for Drug Users, recognizes that social stigma prevents women from obtaining health and social care required to achieve their human right to health.

Human trafficking poses a serious impediment to women possessing human rights through international drug policies. A UNODC report in 2020, the Global Report on Trafficking in Persons 2020, identified that in 2018, for every 10 human trafficking victims detected globally, roughly five were adult women and two were girls. OHCHR stated that human trafficking is a modern form of slavery and a violation of human rights. One of the major factors causing human trafficking to take place is economic hardship. UNODC Global Report on Trafficking in Persons 2020 (2020) identified that economic need made up 51% of the pre-existing factors behind trafficking. Approximately 77% of women are trafficked for sexual exploitation and 14% are trafficked for forced labor; in 2017, CND found that both scenarios could be mitigated if the women being trafficked were not sustaining themselves and their family with drug money. In 2018, UN General Assembly resolution 73/263, Trafficking in Women and Girls, aimed to increase co-operation between Member States and NGOs in order to reduce the gender inequality caused by trafficking. The COVID-19 pandemic exacerbated the economic challenges faced by women in regards to drug use and globally it has caused the most severe recession since the Second World War. More women resort to using drugs as a result of the recession and it is likely that more women will also be susceptible to being trafficked.

In the last decade, treatment for female drug users has been recognized by CND resolution 55/5 Promoting Strategies and Measures Addressing Specific Needs of Women in the Context of Comprehensive and Integrated Drug Demand Reduction Programs and Strategies. The 2021 World

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220 UN CND, Facilitating Access to Comprehensive, Scientific Evidence-Based Drug Demand Reduction Services and Related Measures, Including for People Impacted by Social Marginalization (CND/64/5), 2021.
221 Ibid.
223 UN CND, Promoting Non-stigmatizing Attitudes to ensure the Availability of, Access to and Delivery of Health, Care and Social Services for Drug Users (CND/61/11), 2018.
225 Ibid., p. 31.
228 UNODC, Global Report on Trafficking in Persons Booklet 1: Global Overview, 2020, p. 32.
Drug Report has noted that the COVID-19 pandemic has led to bigger improvements than the aforementioned attention by UN institutions. Non-profit organizations in Kenya such as Social Needs, for example, have trained people to provide basic counselling for drug users as well as children susceptible to drug use during the pandemic. However the COVID-19 pandemic has also challenged CND, and other UN institutions, with some of the problems that pandemic mitigation effects caused. The COVID-19 pandemic is a main reason why in 2020, 120 million individuals were pushed into extreme poverty and 255 million full-time jobs were lost. Women have been impacted by the social ramifications of the COVID-19 pandemic, and the rise in poverty and inequality will further affect women's socioeconomic statuses.

Decriminalization vs Incarceration

INCB has requested that the three core drug conventions of 1961, 1971, and 1988 grant flexibility in regards to the penalization of drug-related offenses. INCB also stated that the penalization of drug-related offenses are subject to each Member States' constitutional principles and the basic concepts of its legal system. This has caused over 10 million individuals currently incarcerated worldwide for drug-related crimes. That is 20% of prisoners worldwide; 83% of whom are incarcerated for personal use. CND, being aware of the fact that INCB renders criminalization of drug use to Member States, held events in 2019 and 2021 cementing its position on the decriminalization of drug use. CND advocated for the mitigation of the human rights violations that can arise from criminalization, such as the right to a fair trial, as in article 10 of UDHR.

International Drug Policy Consortium and Harm Reduction International pointed out in 2021 that the incarceration of drug users has unintended consequences, such as: extrajudicial killings, unfair trials, lack of treatment for substance abuse, and the death penalty. The process of being arrested and going to trial can incur multiple human rights violations. In 2021, the UNODC found that one in every three prisoners were not given a trial which violated their right to a fair trial as indicated in article 10 of UDHR. The 2021 report by the International Drug Policy Consortium found that arrests disproportionately targeted drug users on the basis of race, gender, and poverty which is in violation of the right to non-discrimination. In 2015, CND defended its position on protecting the right to life in announcing that “the imposition of death penalty sentences and executions for drug offences contravene international human rights law.”

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235 Ibid., p. 74.
236 Ibid.
238 Ibid., p. 34.
244 UN General Assembly, Universal Declaration of Human Rights (A/RES/217 A (III)), 1948.
246 Ibid.
249 CND Blog, Death Penalty, 2015.
Maria-Goretti Ane, African consultant for International Drug Policy Consortium, defines decriminalization of drugs to mean "that drug use remains prohibited but is no longer considered as a criminal offence." Decriminalization is an opportunity to prevent drug users from having their right to degrading punishment, which was afforded to them in article 5 of UDHR, from being violated. In 2001, Portugal started the trend of decriminalizing possession of drugs for personal use. In Uruguay, Canada, and some parts of the United States, legislative reviews of cannabis laws in an attempt to create a discourse on decriminalizing cannabis. Alternatively, Member States around the world are starting to adopt alternatives to criminalizing drug use. One such method is accountability courts, as these courts offer an alternative to incarceration through enhanced supervision and treatment given to the offender. Diversion programs have provided drug education and disorder treatments to drug users rather than arresting and prosecuting offenders that are caught using drugs. Alternatives to incarceration and decriminalization protect the human rights of drug users by not be subjecting them to inhuman treatment or punishment.

**Conclusion**

Incorporating human rights into international drug policies has created an opportunity to foster collaborative learning to implement more social-centered policies. CND takes a human rights centered approach when creating new international drug policies. CND’s resolution 59/5, titled *Mainstreaming a Gender Perspective in Drug-Related Policies and Programs* created a space for women's health and social rehabilitation when, and after, using drugs. The 2021 blog by CND on *Decriminalization: What Works and What Does not* cements CND’s, and the rest of the UN’s, position on penalizing drug offences. The blog acts a foundation for future CND resolutions to use language that protects the right to humane treatment and punishment. COVID-19 poses a long term problem when incorporating human rights into international drug policy due to the socio-economic crises that it produces.

**Further Research**

While researching, delegates are encouraged to consider the following questions: How can CND rely on other UN institutions to incorporate human rights into their resolutions regarding international drug policy? How can CND implement the information they receive from reports into international drug policy? How can CND utilize, and replicate, the ways in which the COVID-19 pandemic has led to some innovations, specifically access to treatment for women, in international drug policy? How can existing frameworks and institutions approaches be adapted during a global pandemic?

**Annotated Bibliography**


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258 UNODC, *CND*, 2021
259 Ibid.
262 Ibid.
This research was published just as human rights were beginning to be recognized in the discourse surrounding international drug policy. This research identifies the areas such as incarceration, the death penalty, and discrimination that has led to numerous violations of human rights by international drug policy. The suggestions proposed help guide delegates to areas of international drug policy that have been reformed and areas where the suggestions are still relevant thirteen years later.


Glenn Greenwald published a highly influential paper addressing the decriminalization of all drugs by the Portuguese government in 2001. Greenwald highlights the effect of decriminalization on reducing social stigma, drug usage, and HIV rates. By providing data from all over the world, this resource is extremely useful for delegates wishing to provide ways of addressing the criminalization of drugs.


The death penalty is one of the biggest barriers of fully incorporating human rights into international drug policy. The 2009 report by Human Rights Watch provides extensive case studies, from all over the world, covering the impact of incarceration and the death penalty on the human rights of drug users. This is useful for delegates researching the right to humane treatment within international drug policy.


The guidelines produced by the UNDP offers delegates a human rights-based approach to understanding and addressing the world drug problem. It consolidates the human rights principles as well as the obligations Member States have to uphold human rights standards.


In 2018, the International Drug Policy Consortium published a study on international drug policy in the decade since the 2009 Political Declaration and Plan of Action on Drugs. Part 1 offers a concise history of the international framework surrounding international drug policy. Part 2, section 1; and part 3, section 4, chapter 4 offers a key insight into the ways in which the UN has attempted to incorporate human rights into international drug policy. This study will provide delegates with an insight into the rights to non-discrimination, humane treatment, and fair trials.


Jensema and Sandwell provide a comprehensive guide on the relationship between human rights and international drug policy. This resource indicates the work of UN institutions such as CND, UNODC, and INCB in considering human rights when creating the framework of international drug policy. This guide will be useful to delegates interested in the process of utilizing the existing international framework when coming up with solutions to incorporate human rights into international drug policy.

Malinowska and Rychkova produced a study that focuses on the drug control system within international drug policy leading up to UNGASS 2016. This resource provides delegates with an excellent source of gender-disaggregated data from all over the world on the World Drug Problem. Such data is vital for delegates as it highlights how international drug policy has impacted women drug users; specifically on issues such as decriminalization, access to treatment and social stigma.


Open Society Foundations, the International Harm Reduction Association, Human Rights Watch, and the Canadian HIV/AIDS Legal Network jointly published a series of fact sheets regarding the incorporation of human rights into international drug policy. The fact sheet touches on six areas of implementing human rights into international drug policy: harm reduction; drugs, criminal laws, and policing practices; harm reduction in places of detention; compulsory drug treatment; controlled essential medicines; and crop eradication. Delegates will find these fact sheets useful when creating a foundation to develop their research.


After General Assembly resolution 65/187 (2010), titled “Intensification of Efforts to Eliminate All Forms of Violence Against Women,” Rashida Manjoo, produced a report in 2013. This resource is critical for delegates research as it bridges the gap between the process of being incarcerated and life once incarcerated, finishing with the consequences of incarceration on women drug users.


The World Drug Report is an annual report published by the United Nations Office on Drugs and Crime, which provides an in-depth analysis of the global drug markets. The effect of COVID-19 on the global drug market was taken into consideration with an entire booklet being dedicated to COVID-19. The “Special Points of Interest” within booklet 1 provides a brief overview of the present challenges currently facing international drug policy. Delegates will find this source useful as they explore the positive and negative impact that COVID-19 has had on international drug policy.

Bibliography


