

Forum: World Health Organisation Committee

Issue: Combating addiction as an illness

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Introduction

The widespread belief that drug addiction is essentially a social problem, rather than a health problem, has been shaped in part by the impact of drug dependency on social structures. Medical methods for both prevention and therapy are also deficient. Looking at data drug and alcohol dependency have been demonstrated to be a chronic medical condition. In most recent medical reports, drug dependency was contrasted with a series of illnesses such as type 2 diabetes, hypertension, and asthma in terms of diagnosis, thus resulting in a serious concern of specialists in the medical field. The origin and progression of each of these illnesses are similarly influenced by genetic heredity, individual decision-making, and environmental influences. Brain chemistry and function are significantly and permanently altered by drug dependency.

There are effective treatments for alcohol and nicotine addiction, but not for amphetamine or marijuana addiction. For all of these disorders, medication compliance and recurrence rates are comparable. Drug abuse has typically been treated like an acute sickness. The findings of the review imply that long-term care techniques of drug management and ongoing supervision result in long-lasting advantages. Like other chronic diseases, drug dependency should be covered by insurance, treated, and assessed.

Treatment for drug addiction is typically not a cure, just like therapy for other chronic illnesses like heart disease or asthma. Addiction, however, may be effectively controlled. During treatment, people may reclaim control over their life and combat the negative consequences that addiction has on their brain and behavior. Chronic illness therapy includes altering deeply ingrained habits, and treatment failure is not

necessarily indicated by recurrence. When someone in recovery from addiction relapses, it's a sign that they need to consult their doctor about restarting, changing, or trying another form of therapy.

According to research, medication should be used as the first line of treatment for opioid addictions (addictions to prescription painkillers or illicit narcotics like heroin or fentanyl), generally in conjunction with counseling or behavioral therapy. Moreover, there are medications that can be used to treat nicotine and alcohol addiction.

Moreover, pharmaceuticals are utilized to aid with drug detoxification, even though this is not the same as therapy and is insufficient to aid in recovery. In most cases, stopping drug usage after detoxification but before receiving therapy results in resuming that use.

Many professionals in the research area have a furious response to the general public that does not recognize addiction as a real medical condition requiring compassionate care as a health issue, rather than a criminal justice issue. This problem raises the possibility that the issue may be our own message, despite the fact that others blame the disparity on the public's ignorance of science or adherence to out-of-date moral beliefs on substance use.

Admitting that addiction differs from the majority of medical disorders due to its high negative externalities, this naturally causes the public and relative consumers to be more fearful and negligent about addiction than they are about conditions like asthma, type II diabetes, and hypertension, we would be more persuasive.

Noting the medical and social implications of this matter, it is important to address how addiction as an illness can be properly combated.

Definition of key terms

Drug abuse

The term is generically referring to the use of illicit drugs, prescription pharmaceuticals, over-the-counter medications, or both, in excess, or for purposes other than those for which they were designed. Drug misuse can result in issues with relationships, health, emotions, and employment.

(Drug) Cartel

A cartel is a collection of independent market actors that work together to increase their earnings and gain market dominance/monopoly. Cartels are often alliances of rival businesses that operate in the same industry.

Cartels employ a variety of strategies, such as supply reduction, price fixing/matching, collusive bidding, dumping techniques and market carving.

Decriminalisation

Decriminalization is the process by which the government eliminates the criminal penalties associated with an act, omission, item, or behavior that is regarded as criminal. Decriminalization means that the conduct would still be prohibited but that no one would be prosecuted for it by the legal system.

In the specific cases of drug/substance consumption: A decriminalized model is fundamentally different from a criminal one in that drug use and possession still have consequences but are no longer considered crimes.

Decriminalization does not equal legalization. Drug use and possession remain unlawful even if they are decriminalized for personal use. Drug manufacture and sales continue to incur criminal sanctions.

Legalization (of substances/ vices)

Legalization removes all penalties for possession and personal use of a drug. Regulations are typically established to manage where and how the legal drug can be

produced, sold, and consumed. Criminal or civil penalties may apply if production, sale or consumption occur outside of regulations.

Opioids

Opioids are a group of pharmaceuticals that includes heroin, which is illegal, as well as fentanyl, oxycodone, hydrocodone, codeine, morphine, and many more prescription-only painkillers.

Synthetic Drug(s)

Natural components are not used to make synthetic medications; instead, synthetic compounds are used.

Ecstasy, LSD, and methamphetamine are only a few examples of synthetic substances that are currently available. These are some of the man-made substances referred to as "designer medicines."

Narcobrokers

The meaning of "narcobroker/s" is referring to a person or a linked group of persons who supply the traffic or deals of drugs illegally.

Illicit market

A market that operates illegally is one that is unregulated by the government. Trade in illicit products and services, legal goods and services provided to evade taxes, or both is common in underground marketplaces.

Background Information

Historical Context

Alcohol use

Alcohol and alcoholism are neither new nor surprising to mankind. Although historians have found traces of alcoholic beverages in various historical civilizations, the earliest documented example dates to about 7000 BC. This beverage was consumed in China and is the oldest example to have alcohol's chemical identity established. The majority of the components in it, along with a few others, were fermented grapes.

Although the first alcoholic beverage may have been consumed 9000 years ago, alcohol has subsequently been widely accepted in communities all over the world. Its effects have not been spared on the wealthy and renowned. Many notable figures throughout history have battled alcoholism and even passed away as a result of its consequences.

The amount of alcohol consumed varies by gender and race/ethnicity. Men drink more alcohol than women worldwide, while women in wealthy nations drink more than women in underdeveloped nations. American males are much more likely than women to consume alcohol, binge drink, and report heavy drinking (Substance Abuse and Mental Health Services Administration [SAMSHA] 2013).

Racially speaking, Caucasians report the greatest total alcohol usage among people aged 12 and older across all racial and ethnic groupings (57.4 percent). The proportion of binge drinkers who identify as American Indian or Alaska Native is greatest (30.2%), followed by Caucasians (23.9%), Hispanic/Latinos (23.2%), African

Americans (20.6%), and Asians (12.7%). (SAMHSA 2013). Alarming, trends in alcohol usage among men and women, as well as African-American and Hispanic teenagers, rose between 1991-1992 and 2001-2002, according to two nationally representative surveys. Over the same time period, rates of dependency also rose among men, young African American women, and Asian men (Grant et al. 2004).

These developments make it obvious that a deeper comprehension of the underlying social and cultural elements causing these differences is required. For instance, measures of socioeconomic position (such as education, income, and employment) are often excellent predictors of health behaviors and outcomes and have a propensity to be linked to health. Higher socioeconomic position individuals typically drink more frequently than other individuals. Low socioeconomic level groups likely to consume more alcohol overall among drinkers.

Tobacco use

Despite the serious health risks, tobacco smoking has long been widespread and is currently on the rise. Although there is a lot that is now known about its drawbacks, tobacco is nevertheless cultivated, developed, promoted, and sold in order to earn a sizable portion of the financial pie. As an excise duty, it is one of the major sources of income for the government.

The Maya inhabitants of Central America utilized tobacco leaves for smoking during holy and religious rites about the first century BC, according to archeological findings. Between 470 and 630 AD, the Maya society that had migrated from the south of America began extending as far as the Mississippi Valley and thus, it was thereafter embraced by the nearby indigenous tribes.

In the Status Quo, minors have switched to using nicotine-free e-cigarettes, as it is illegal for them to buy cigarettes in most states until they are 18 years old. Some teenagers believe that vaping will aid in their attempts to stop smoking or stop them from starting. Teenagers are using e-cigarettes increasingly often.

According to the FDA, around 40% of high school students regularly use e-cigarettes. To understand why minors take to vaping, it's critical to remember that e-cigarettes don't come with the same regulations as traditional cigarettes. There is no minimum age restriction to purchase an electronic cigarette in most states. Teenagers are drawn to these gadgets because they sometimes have pleasant flavors like cotton candy and bubble gum. Teenagers who feel that using an e-cigarette is cool or trendy with their mates may vape more often than they smoke cigarettes.

One possible reason adding to the ongoing trend of vaping might also be the rise of tobacco added taxes. Increasing taxes on cigarettes is a win-win proposition: significantly increasing cigarette taxes results in fewer kids starting to smoke, and in more adults quitting while at the same time providing substantial revenue to fund important health, as well as tobacco prevention programs. Every 10 percent increase in the price of cigarettes reduces consumption by about four percent among adults and about seven percent among youth.

Pharmaceutical drug use

The Greek, Egyptian, Indian, and Chinese civilizations, among other ancient societies, are believed to have kept the first written records of medicines. Both Arabic and European nations investigated pharmaceuticals during the Middle Ages. The Renaissance gave rise to scientific inquiry, but it wasn't until the 19th century that

medicine completely transitioned to science, with the development of anesthetics, vaccinations, and antiseptics. Throughout history, people have also utilized drugs for ritualistic and recreational purposes, whether they were naturally occurring (like cannabis or opium) or synthetically produced (LSD or ecstasy). Drug use for therapeutic and recreational purposes has grown into a significant global industry.

The drug market/ illicit substances trade

Drug trafficking, often known as the illicit drug trade, is a global black market for the production, distribution, and sale of illegal narcotics. Most countries utilize drug prohibition laws to forbid the trading of many different forms of drugs, except when done so with a license.

Illicit crop production is concentrated in some locations, although it regularly moves within subregions, occasionally switches between them, and occasionally even shows up in places where it had not previously had official recognition. The majority of illegal opiates in the world are produced in the nations of the Golden Triangle (Lao People's Democratic Republic, Myanmar, and Thailand), the Golden Crescent (Afghanistan, Iran (Islamic Republic of), Lebanon, and Mexico). Shifting production has turned nations like Colombia or the Commonwealth of Independent States' central Asian republics into relatively new and potentially significant opiate producers.

In contrast to this, cocaine manufacturing is highly centralized, with three Andean nations (Bolivia, Colombia, and Peru) accounting for more than 98% of global cocaine supply. The majority of the world's countries grow cannabis, but new regions have the potential to become important producers, including the Commonwealth of Independent States' central Asian republics, whose output hitherto remained unknown.

The medical aspect: When does consumption become an actual illness/dependency?

Dependency does not emerge on its own spontaneously. An individual's perception of a drug and how their body responds to it progressively alter as a result of a protracted period of recurrent substance misuse. Although this process is linear and proceeds in the same order for every individual (initiation, experimenting, frequent use, addiction and, potentially, withdrawal) the length of each stage can vary significantly depending on the person, the dosage, and the substance being abused.

Alcoholism risk is partially inherited via the family. According to research conducted on animals, many alcohol-related characteristics, including sensitivity to the intoxicating and sedative effects of alcohol, development of tolerance and withdrawal symptoms, and even vulnerability to organ damage, may have hereditary roots. Research on twins, family illnesses, and adoption are in favor of a hereditary component to alcoholism.

Dopamine synthesis deficiencies, which are associated with addiction, are likely to have an impact on a patient's personality. Others argue that these brain circuits, which are active in addiction, developed for the purpose of social connection. It makes sense that the powerful bond that may develop between sober addicts plays a crucial part in addiction rehabilitation. On the other hand, conditions like borderline personality disorder that impair these attachment and affiliative systems can make treating addiction extremely difficult.

Major Countries and Organizations Involved

The European Union

The synthetic-drug trade, the cocaine trade, human trafficking, the cannabis trade, and people smuggling are the five most prevalent illicit markets in EU nations. The cocaine traffic ranks third among the 10 markets for 21 of the 27 EU member states. 22 nations ranked synthetic drug trafficking as having the third highest score.

This shows that illegal drug markets are particularly significant in the EU and that European authorities' concerns about the trafficking of cocaine and methamphetamine are legitimate. If authorities do not take immediate remedial action, the EU will soon see an increase in violent and health-related occurrences connected to the drug trade.

The scope of the issue is demonstrated by two problems. First, Europe is still a significant market for cocaine consumption. Although prices have remained consistent, international organizations and state drug-monitoring organizations in EU nations believe that cocaine availability and quality are rising in Europe. Second, issue has to do with cocaine trafficking. The second largest global corridor of cocaine (after the supply chain linking production markets to North America) originates in the Andean countries and is bound for European markets, in particular countries in the EU. In 2020, record quantities of cocaine (over 214 tonnes) were seized in Europe. Of all these seizures, 70 per cent occurred in just three countries: Belgium, the Netherlands and Spain. Despite efforts to seize larger quantities of the drug, the fact that prices remain stable and cocaine purity is increasing would indicate that more cocaine is evading seizure and reaching the EU markets.

Latin American Countries

It is likely that increased competition will result in increased levels of violence among suppliers, as is already happening in some countries, as the once-dominant cocaine cartel monopolies have fragmented into a multitude of potential suppliers operating across several countries and relying on well-known "narcobrokers" with territorial influence and transport infrastructures. With the production of poppies, Mexico is said to be the third-largest opium producer in the world. It is also a significant exporter of heroin and the biggest source of marijuana, cocaine, and methamphetamine for the American market.

The United States

Every year, the United States makes more than 1.5 million drug arrests, the vast majority of which are for simple possession. Since the 1970s, the drug war has completely failed to reduce problematic drug use and drug-related harms while creating historic levels of imprisonment and marginalizing tens of millions of Americans, disproportionately poor and people of color. A drug arrest has serious aftereffects that can continue for a lifetime. Additionally, drug courts have not made things better.

UNODC

By prioritizing respect for human rights and the true requirements of service users in their clinical, motivational, and social aspects, UNODC encourages the development of drug use prevention methods in various countries that are based on scientific evidence.

To enhance this work, UNODC promotes studies and analysis on drug production, trafficking, and consumption in order to provide justification for the nations to conduct interventions that are appropriate to each country's situation. Also, the UNODC provides legal help to nations for the implementation of drug control conventions and treaties, along with the required alterations to national laws.

Regarding prevention, UNODC encourages the development of information and knowledge-based initiatives to enable people, particularly the young, to develop their capacities and have the chance to make decisions that are favorable to their quality of life.

WHO

The WHO's "The Alcohol, Drugs and Addictive Behaviours Unit" assists nations in putting into practice the global strategy to reduce alcohol harm, as well as in creating and carrying out multisectoral action plans and program activities to achieve Sustainable Development Goal target 3.5 and other alcohol-related goals.

Alcohol and illegal drugs are two examples of psychoactive chemicals that the WHO has made significant progress in combating. The detrimental effects on people's health that illegal drug usage has on society are one of its most significant effects.

There is little doubt that a variety of factors have influenced how the intricate worldwide illegal drug issue has developed. The gender, age, and rate of urbanization of the population are sociodemographic trends that have an impact. However, the WHO is working closely in assisting financing and material support gain in cases as such, through its numerous plans of action.

HR Watch

Human Rights Watch has repeatedly examined the current drug policy, which has had disastrous consequences for human rights: undermining the rights to health and privacy; providing a justification for cruel and unusual punishment, torture, and extrajudicial killings; and supporting the activities of organized criminal groups that engage in abuses, subvert the rule of law, and corrupt authorities.

Governments are urged by Human Rights Watch to legalize all forms of drug use and possession. In order to lessen the significant costs to human rights of present tactics, they also call for governments to embrace alternative approaches to the drug trade, including a reduction in the use of the criminal justice system to control drug production and distribution. As a result, they demand changes to international drug treaties and laws that obstruct the investigation of these options.

Global Commission on Drug Policy

According to the GCDP study, "drug use by people who cause no harm to others should be decriminalized." To "bring to the world level an educated, science-based dialogue about compassionate and practical approaches to lessen the harm caused by drugs to individuals and communities," the commission was established.

Through the fulfillment of the Sustainable Development Goals and Agenda 2030, poverty will be eliminated, gender parity will be attained, and the planet will be saved. At the national, regional, and international levels, there is still a shortage of this implementation, which is based on consistent public policies. The best example of this is in drug policy, where voices from the fields of science, human rights, and health urge for

reform but the majority of nations continue to prioritize ideology through militarization and law enforcement.

Timeline of Events

- 1987** The Drug Policy Foundation was established by Arnold Trebach and Kevin Zeese, who called it the "loyal resistance to the war on drugs." The repeal of drug prohibition has long been supported by prominent conservatives like Milton Friedman and William Buckley, as well as civil libertarians like former ACLU Executive Director Ira Glasser.
- 2009** The World Health Organization (WHO) released technical recommendations for nations to define goals for universal access to HIV prevention, treatment, and care for injecting drug users in conjunction with UNODC and the United Nations Joint Programme on HIV and AIDS (UNAIDS). High-level political organizations, including the UN General Assembly, have adopted the recommendations, which encourage a complete range of interventions and services.
- December 2013** Being the first nation in the world to legalize marijuana, Uruguay. In 2018, marijuana use by adults became legal in Canada.
- 2015** After a review of the most recent data, the WHO Expert Committee on Drug Dependency (ECDD) reiterated its earlier recommendations that ketamine not be included on the schedule. The committee recognized the concerns about ketamine usage expressed by various nations and UN bodies, but came to the conclusion that the substance does not currently appear to represent a severe enough risk to global public health to warrant scheduling.
- 2016** The WHO publishes a report on the social and medical implications of cannabis usage. Cannabinoids and synthetic cathinones, the two most prevalent classes of novel psychoactive drugs, are differentiated in WHO's normative work with the primary goal of streamlining diagnostic advice for substance dependency.

Relevant UN Treaties and Resolutions

A/RES/65/233- implemented in 2010 through UN's General Assembly

The resolution in question encouraged different forms of international collaboration to stop drug trafficking and called attention to the multilateral aspect of the drug trade. It also encourages member states to apply sustainable crop management methods, such as alternative development and, where applicable, preventative alternative development programs, eradication, and law enforcement actions, are used to stop the illegal production of crops.

Resolution 53/12- implemented in 2002

In certain countries, opium poppy seeds derived from illicitly cultivated opium poppy farms are used to disguise and camouflage shipments of the poppy straw, thus the resolution acknowledges the importance to strengthen procedures for the control of the movement of these seeds, through various ways.

Resolution 53/3- implemented in 2010

The resolution tackles the significance of investigation of assets in cases of drug trafficking and related offenses, as well as strengthening national capacities in the administration and disposal of property and other assets confiscated in cases of drug trafficking through mechanisms like awareness-raising campaigns and training programs aimed at law enforcement authorities and judicial officers.

Resolution 53/5- implemented in 2010

The resolution enhances regional collaboration between Afghanistan and transit states, as well as the support of all impacted nations for counter-narcotics initiatives, in accordance with the shared responsibility concept. One proposed solution refers to requesting that financial institutions provide Afghanistan and the most affected transit

states with the necessary facilities, support, and assistance, including by enhancing said states' ability to enforce the rule of law.

Previous Attempts to Solve the Issue

“National Institute on Drug Abuse International Program: improving opioid use disorder treatment through international research training”

Opioids are not consistently accessible in many countries, despite being classified by the WHO as an essential drug. There are many factors that prevent adequate use for pain relief, including lack of training and awareness among medical professionals, worries about dependence, cultural attitudes, insufficient sources, and legal obstacles like restrictions on international trade and obligations under international treaties.

Opioid replacement treatments have been shown to be successful in treating opioid use disorders, especially when used in conjunction with other complete treatment plans that incorporate psychosocial interventions. This form of therapy includes the use of opioid agonists.

Operation Cyber Chase

Major traffickers were the focus of Operation Cyber Chase, which purportedly sent prescription prohibited drugs, including narcotics, amphetamines, and anabolic steroids, straight to consumers of all ages without first having them examined by a doctor. They used more than 200 websites to market pharmaceutical restricted medications illegally, employing "rogue" Internet pharmacies.

The Network for the Improvement of Addiction Treatment

Participating treatment facilities are taught how to employ process improvement techniques by the Network for the Improvement of Addiction Therapy. Process changes resulted in shorter treatment times and higher levels of care retention. According to change project reports, alcohol and drug treatment facilities may significantly increase client access and retention for small patient cohorts throughout relatively quick cycles.

Reports on change projects provided an overview of the efforts made during the change cycle and documented any immediate project implications for the customers served.

The “CURE” project

In the UK, smoking is the leading contributor to avoidable mortality, disability, ill health, and social inequality. With the help of the Greater Manchester Make Smoking History team, Greater Manchester Cancer, and Wythenshawe Hospital, the CURE project was a pilot research. This pilot study's objective was to evaluate the viability, acceptability, and effects of providing smokers admitted to Wythenshawe Hospital with a thorough "opt-out" tobacco addiction treatment pathway.

Possible Solutions

Decriminalisation

In the Netherlands, decriminalizing narcotics has been successful. The legalization of heroin and other hard drugs has made it possible to treat addicts like patients. As a consequence, practically any new heroin addicts are registered, and those who already use the drug are encouraged and assisted in finding employment.

Drugs may simply be significantly taxed and subject to regulation similar to that which applies to alcohol and cigarettes. The cost may still be far lower than what is now being paid on the black market, and the money made from the regulation might then go toward programs for rehabilitation and education.

Adequate police responses

Most people believe that the police response to drug usage and trafficking centers around the drugs department. Its operations unit conducts the most thorough investigations against drug traffickers, focusing specifically on the root of the issue. Moreover, it produces the most substantial body of information regarding pharmaceuticals both locally and globally.

Inevitably, regular patrol and investigation squads target drug usage, trafficking, and associated violence. Patrol units and detectives end up detaining a lot of drug users because they concentrate their efforts on reducing street crime, which is mostly committed by drug users. An analysis of the geographic distribution of drug sales inside a city demonstrates the significance of collective self-defense. Drug traffickers are unable to establish themselves in some places.

Informational campaigns

Health education interventions and/or social marketing initiatives are frequently brought up while talking about health communication campaigns. Some instructional initiatives are solely carried out in clinical or institutional settings, not always including media with wide audiences. On the other hand, social marketing initiatives frequently

use marketing techniques outside of communication strategies, such as approaches to increase rewards and decrease expenses to encourage changes in health behavior. Health education and social marketing may both benefit from and be supported by health communication efforts.

Improving treatment centers

Many treatment centers struggle with weak organizational infrastructures, staffing instability, limited financial resources, and little capacity to collect and organize data⁸. Because resources are limited, they may benefit from re-engineering their service delivery and using process improvement strategies.

Services for treating mental health and addiction problems, however, have had little attention in efforts to improve the quality of healthcare.

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